

| United States Bankruptcy Court<br>Central District of California, Santa Ana Division   |   | Voluntary Petition  |   |                                     |                              |                               |                                |                               |                                      |                                |                                      |                                      |               |                          |               |                          |                |                          |                |                          |              |                          |
|--|---|---|---|-------------------------------------|------------------------------|-------------------------------|--------------------------------|-------------------------------|--------------------------------------|--------------------------------|--------------------------------------|--------------------------------------|---------------|--------------------------|---------------|--------------------------|----------------|--------------------------|----------------|--------------------------|--------------|--------------------------|
| Name of Debtor (if individual, enter Last, First, Middle):<br><b>Erhard, Harold Helmut</b>   | Name of Joint Debtor (Spouse) (Last, First, Middle):<br><b>Erhard, Francine Gail</b>  |   |   |                                     |                              |                               |                                |                               |                                      |                                |                                      |                                      |               |                          |               |                          |                |                          |                |                          |              |                          |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):   | All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):  |   |   |                                     |                              |                               |                                |                               |                                      |                                |                                      |                                      |               |                          |               |                          |                |                          |                |                          |              |                          |
| Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) /Complete EIN (if more than one, state all): <b>3976</b>  | Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) /Complete EIN (if more than one, state all): <b>5161</b>   |   |   |                                     |                              |                               |                                |                               |                                      |                                |                                      |                                      |               |                          |               |                          |                |                          |                |                          |              |                          |
| Street Address of Debtor (No. & Street, City, State & Zip Code):<br><b>22526 Formentor<br/>Mission Viejo, CA</b><br><br><table style="width: 100%;"><tr><td style="width: 50%;">ZIPCODE <b>92692</b></td><td style="width: 50%;">ZIPCODE <b>92692</b></td></tr></table>  | ZIPCODE <b>92692</b>  | ZIPCODE <b>92692</b>  | Street Address of Joint Debtor (No. & Street, City, State & Zip Code):<br><b>22526 Formentor<br/>Mission Viejo, CA</b><br><br><table style="width: 100%;"><tr><td style="width: 50%;">ZIPCODE <b>92692</b></td><td style="width: 50%;">ZIPCODE <b>92692</b></td></tr></table> |                                     | ZIPCODE <b>92692</b>         | ZIPCODE <b>92692</b>          |                                |                               |                                      |                                |                                      |                                      |               |                          |               |                          |                |                          |                |                          |              |                          |
| ZIPCODE <b>92692</b>   | ZIPCODE <b>92692</b>  |   |   |                                     |                              |                               |                                |                               |                                      |                                |                                      |                                      |               |                          |               |                          |                |                          |                |                          |              |                          |
| ZIPCODE <b>92692</b>   | ZIPCODE <b>92692</b>  |   |   |                                     |                              |                               |                                |                               |                                      |                                |                                      |                                      |               |                          |               |                          |                |                          |                |                          |              |                          |
| County of Residence or of the Principal Place of Business:<br><b>Orange</b>  | County of Residence or of the Principal Place of Business:<br><b>Orange</b>   |   |   |                                     |                              |                               |                                |                               |                                      |                                |                                      |                                      |               |                          |               |                          |                |                          |                |                          |              |                          |
| Mailing Address of Debtor (if different from street address)<br><br><table style="width: 100%;"><tr><td style="width: 50%;">ZIPCODE</td><td style="width: 50%;">ZIPCODE</td></tr></table>  | ZIPCODE   | ZIPCODE   | Mailing Address of Joint Debtor (if different from street address):<br><br><table style="width: 100%;"><tr><td style="width: 50%;">ZIPCODE</td><td style="width: 50%;">ZIPCODE</td></tr></table>  |                                     | ZIPCODE                      | ZIPCODE                       |                                |                               |                                      |                                |                                      |                                      |               |                          |               |                          |                |                          |                |                          |              |                          |
| ZIPCODE  | ZIPCODE   |   |   |                                     |                              |                               |                                |                               |                                      |                                |                                      |                                      |               |                          |               |                          |                |                          |                |                          |              |                          |
| ZIPCODE  | ZIPCODE   |   |   |                                     |                              |                               |                                |                               |                                      |                                |                                      |                                      |               |                          |               |                          |                |                          |                |                          |              |                          |
| Location of Principal Assets of Business Debtor (if different from street address above):<br><br><table style="width: 100%;"><tr><td style="width: 50%;">ZIPCODE</td><td style="width: 50%;">ZIPCODE</td></tr></table>   |   |   | ZIPCODE   | ZIPCODE                             |                              |                               |                                |                               |                                      |                                |                                      |                                      |               |                          |               |                          |                |                          |                |                          |              |                          |
| ZIPCODE  | ZIPCODE   |   |   |                                     |                              |                               |                                |                               |                                      |                                |                                      |                                      |               |                          |               |                          |                |                          |                |                          |              |                          |
| <b>Type of Debtor</b><br>(Form of Organization)<br>(Check one box.)<br><input checked="" type="checkbox"/> Individual (includes Joint Debtors)<br><i>See Exhibit D on page 2 of this form.</i><br><input type="checkbox"/> Corporation (includes LLC and LLP)<br><input type="checkbox"/> Partnership<br><input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)<br><br><b>Chapter 15 Debtor</b><br>Country of debtor's center of main interests:<br>_____<br>Each country in which a foreign proceeding by, regarding, or against debtor is pending:<br>_____   | <b>Nature of Business</b><br>(Check one box.)<br><input type="checkbox"/> Health Care Business<br><input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B)<br><input type="checkbox"/> Railroad<br><input type="checkbox"/> Stockbroker<br><input type="checkbox"/> Commodity Broker<br><input type="checkbox"/> Clearing Bank<br><input type="checkbox"/> Other<br><br><b>Tax-Exempt Entity</b><br>(Check box, if applicable.)<br><input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code). | <b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box.)<br><input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding<br><input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11<br><input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12<br><input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13<br><input type="checkbox"/> Chapter 13<br><br><b>Nature of Debts</b><br>(Check one box.)<br><input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts. |   |                                     |                              |                               |                                |                               |                                      |                                |                                      |                                      |               |                          |               |                          |                |                          |                |                          |              |                          |
| <b>Filing Fee</b> (Check one box)<br><input checked="" type="checkbox"/> Full Filing Fee attached<br><input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.<br><input type="checkbox"/> Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.   | <b>Check one box:</b><br><input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D).<br><input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).<br><b>Check if:</b><br><input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 (amount subject to adjustment on 4/01/16 and every three years thereafter).  | <b>Chapter 11 Debtors</b><br><b>Check all applicable boxes:</b><br><input type="checkbox"/> A plan is being filed with this petition<br><input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).  |   |                                     |                              |                               |                                |                               |                                      |                                |                                      |                                      |               |                          |               |                          |                |                          |                |                          |              |                          |
| <b>Statistical/Administrative Information</b><br><input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors.<br><input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.   |   | THIS SPACE IS FOR COURT USE ONLY  |   |                                     |                              |                               |                                |                               |                                      |                                |                                      |                                      |               |                          |               |                          |                |                          |                |                          |              |                          |
| <b>Estimated Number of Creditors</b><br><table style="width: 100%;"><tr><td style="width: 10%;">1-49</td><td style="width: 10%; text-align: center;"><input checked="" type="checkbox"/></td><td style="width: 10%;">50-99</td><td style="width: 10%; text-align: center;"><input type="checkbox"/></td><td style="width: 10%;">100-199</td><td style="width: 10%; text-align: center;"><input type="checkbox"/></td><td style="width: 10%;">200-999</td><td style="width: 10%; text-align: center;"><input type="checkbox"/></td><td style="width: 10%;">1,000-5,000</td><td style="width: 10%; text-align: center;"><input type="checkbox"/></td><td style="width: 10%;">5,001-10,000</td><td style="width: 10%; text-align: center;"><input type="checkbox"/></td><td style="width: 10%;">10,001-25,000</td><td style="width: 10%; text-align: center;"><input type="checkbox"/></td><td style="width: 10%;">25,001-50,000</td><td style="width: 10%; text-align: center;"><input type="checkbox"/></td><td style="width: 10%;">50,001-100,000</td><td style="width: 10%; text-align: center;"><input type="checkbox"/></td><td style="width: 10%;">Over 100,000</td><td style="width: 10%; text-align: center;"><input type="checkbox"/></td></tr></table> |   |   | 1-49  | <input checked="" type="checkbox"/> | 50-99                        | <input type="checkbox"/>      | 100-199                        | <input type="checkbox"/>      | 200-999                              | <input type="checkbox"/>       | 1,000-5,000                          | <input type="checkbox"/>             | 5,001-10,000  | <input type="checkbox"/> | 10,001-25,000 | <input type="checkbox"/> | 25,001-50,000  | <input type="checkbox"/> | 50,001-100,000 | <input type="checkbox"/> | Over 100,000 | <input type="checkbox"/> |
| 1-49   | <input checked="" type="checkbox"/>   |   | 50-99   | <input type="checkbox"/>            | 100-199                      | <input type="checkbox"/>      | 200-999                        | <input type="checkbox"/>      | 1,000-5,000                          | <input type="checkbox"/>       | 5,001-10,000                         | <input type="checkbox"/>             | 10,001-25,000 | <input type="checkbox"/> | 25,001-50,000 | <input type="checkbox"/> | 50,001-100,000 | <input type="checkbox"/> | Over 100,000   | <input type="checkbox"/> |              |                          |
| <b>Estimated Assets</b><br><table style="width: 100%;"><tr><td style="width: 10%;">\$0 to \$50,000</td><td style="width: 10%;">\$50,001 to \$100,000</td><td style="width: 10%;">\$100,001 to \$500,000</td><td style="width: 10%;">\$500,001 to \$1 million</td><td style="width: 10%;">\$1 million to \$10 million</td><td style="width: 10%;">\$10 million to \$50 million</td><td style="width: 10%;">\$50 million to \$100 million</td><td style="width: 10%;">\$100 million to \$500 million</td><td style="width: 10%;">\$500 million to \$1 billion</td><td style="width: 10%;">\$1 billion to More than \$1 billion</td></tr></table>   |   |   | \$0 to \$50,000   | \$50,001 to \$100,000               | \$100,001 to \$500,000       | \$500,001 to \$1 million      | \$1 million to \$10 million    | \$10 million to \$50 million  | \$50 million to \$100 million        | \$100 million to \$500 million | \$500 million to \$1 billion         | \$1 billion to More than \$1 billion |               |                          |               |                          |                |                          |                |                          |              |                          |
| \$0 to \$50,000  | \$50,001 to \$100,000   | \$100,001 to \$500,000  | \$500,001 to \$1 million  | \$1 million to \$10 million         | \$10 million to \$50 million | \$50 million to \$100 million | \$100 million to \$500 million | \$500 million to \$1 billion  | \$1 billion to More than \$1 billion |                                |                                      |                                      |               |                          |               |                          |                |                          |                |                          |              |                          |
| <b>Estimated Liabilities</b><br><table style="width: 100%;"><tr><td style="width: 10%;">\$0 to \$50,000</td><td style="width: 10%;">\$50,001 to \$100,000</td><td style="width: 10%;">\$100,001 to \$500,000</td><td style="width: 10%;">\$500,001 to \$1 million</td><td style="width: 10%;">\$1 million to \$10 million</td><td style="width: 10%;">\$10 million to \$50 million</td><td style="width: 10%;">\$50 million to \$100 million</td><td style="width: 10%;">\$100 million to \$500 million</td><td style="width: 10%;">\$500 million to \$1 billion</td><td style="width: 10%;">\$1 billion to More than \$1 billion</td></tr></table>  |   | \$0 to \$50,000   | \$50,001 to \$100,000   | \$100,001 to \$500,000              | \$500,001 to \$1 million     | \$1 million to \$10 million   | \$10 million to \$50 million   | \$50 million to \$100 million | \$100 million to \$500 million       | \$500 million to \$1 billion   | \$1 billion to More than \$1 billion |                                      |               |                          |               |                          |                |                          |                |                          |              |                          |
| \$0 to \$50,000  | \$50,001 to \$100,000   | \$100,001 to \$500,000  | \$500,001 to \$1 million  | \$1 million to \$10 million         | \$10 million to \$50 million | \$50 million to \$100 million | \$100 million to \$500 million | \$500 million to \$1 billion  | \$1 billion to More than \$1 billion |                                |                                      |                                      |               |                          |               |                          |                |                          |                |                          |              |                          |

|  |               |   |
|--|---------------|---|
| <b>Voluntary Petition</b><br><i>(This page must be completed and filed in every case)</i>  |               | Name of Debtor(s):<br><b>Erhard, Harold Helmut &amp; Erhard, Francine Gail</b>  |
| <b>All Prior Bankruptcy Case Filed Within Last 8 Years</b> (If more than two, attach additional sheet)   |               |   |
| Location<br>Where Filed: <b>None</b>   | Case Number:  | Date Filed:   |
| Location<br>Where Filed:   | Case Number:  | Date Filed:   |
| <b>Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor</b> (If more than one, attach additional sheet)  |               |   |
| Name of Debtor:<br><b>None</b>   | Case Number:  | Date Filed:   |
| District:  | Relationship: | Judge:  |
| <b>Exhibit A</b><br>(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)   |               | <b>Exhibit B</b><br>(To be completed if debtor is an individual whose debts are primarily consumer debts.)<br>I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. § 342(b). |
| <input type="checkbox"/> Exhibit A is attached and made a part of this petition.   |               | <b>X</b> <u>/s/ Ronald D. Halpern</u> <span style="float: right;">3/14/14</span><br>Signature of Attorney for Debtor(s)   |
| <b>Exhibit C</b><br>Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?<br><input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition.<br><input checked="" type="checkbox"/> No  |               |   |
| <b>Exhibit D</b><br>(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)<br><input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition.<br>If this is a joint petition:<br><input checked="" type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.  |               |   |
| <b>Information Regarding the Debtor - Venue</b><br>(Check any applicable box.)<br><input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.<br><input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.<br><input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.                        |               |   |
| <b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b><br>(Check all applicable boxes.)<br><input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)<br><br>_____<br>(Name of landlord that obtained judgment)<br><br>_____<br>(Address of landlord)<br><input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and<br><input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.<br><input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)). |               |   |

**Voluntary Petition**

(This page must be completed and filed in every case)

Name of Debtor(s):

**Erhard, Harold Helmut & Erhard, Francine Gail****Signatures****Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X /s/ Harold Helmut Erhard**

Signature of Debtor

**Harold Helmut Erhard****X /s/ Francine Gail Erhard**

Signature of Joint Debtor

**Francine Gail Erhard****(949) 215-3123**

Telephone Number (If not represented by attorney)

**March 14, 2014**

Date

**Signature of a Foreign Representative**

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.

Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

**X**

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

**Signature of Attorney\*****X /s/ Ronald D. Halpern**

Signature of Attorney for Debtor(s)

**Ronald D. Halpern 81192****Ronald D. Halpern, Attorney at Law****30011 Ivy Glenn Drive, Suite 112****Laguna Niguel, CA 92677****(949) 249-2922 Fax: (949) 495-0365****ronhalpern@aol.com****March 14, 2014**

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

**Signature of Non-Attorney Petition Preparer**

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

**X**

Signature

Date

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

*A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.*

**X**

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

**STATEMENT OF RELATED CASES  
INFORMATION REQUIRED BY LBR 1015-2  
UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA**

1. A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, his/her spouse, his or her current or former domestic partner, an affiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

**None**

2. (If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

**None**

3. (If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

**None**

4. (If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

**None**

I declare, under penalty of perjury, that the foregoing is true and correct.

Executed at \_\_\_\_\_, California.  
Dated: March 14, 2014

/s/ Harold Helmut Erhard  
*Signature of Debtor*  
/s/ Francine Gail Erhard  
*Signature of Joint Debtor*

Name: Ronald D. Halpern, Attorney at LawAddress: 30011 Ivy Glenn Drive, Suite 112Laguna Niguel, CA 92677Telephone: (949) 249-2922 Fax: (949) 495-0365 Attorney for Debtor Debtor in Pro Per

## UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA

List all names including trade names, used by Debtor(s) within last 8 years:

**Erhard, Harold Helmut**  
**Erhard, Francine Gail**

Case No.:

### **NOTICE OF AVAILABLE CHAPTERS**

(Notice to Individual Consumer Debtor Under § 342(b) of the Bankruptcy Code)

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### **1. Services Available from Credit Counseling Agencies**

**With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis.** The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

**In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge.** The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

## **2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors**

### **Chapter 7: Liquidation (\$245 filing fee, \$46 administrative fee, \$15 trustee surcharge: Total fee \$306)**

1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

### **Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$46 administrative fee: Total fee \$281)**

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### **Chapter 11: Reorganization (\$1167 filing fee, \$46 administrative fee: Total fee \$1213)**

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

### **Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$46 administrative fee: Total fee \$246)**

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

## **3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials**

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

**Certificate of [Non-Attorney] Bankruptcy Petition Preparer**

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

Printed Name and title, if any, of Bankruptcy Petition Preparer  
Address:

Social Security number (if the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)  
(Required by 11 U.S.C. § 110.)

**X** \_\_\_\_\_  
Signature of Bankruptcy Petition Preparer or officer, principal,  
responsible person, or partner whose Social Security number is  
provided above.

**Certificate of the Debtor**

I (We), the debtor(s), affirm that I (we) have received and read this notice.

**Erhard, Harold Helmut & Erhard, Francine Gail**

Printed Name(s) of Debtor(s)

**X /s/ Harold Helmut Erhard**

Signature of Debtor

**3/14/14**

Date

Case No. (If known) \_\_\_\_\_

**X /s/ Francine Gail Erhard**

Signature of Joint Debtor (if any)

**3/14/14**

Date

IN RE:

Case No. \_\_\_\_\_

Erhard, Harold Helmut & Erhard, Francine Gail

Chapter 7 \_\_\_\_\_

Debtor(s)

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

|   |                    |
|---|--------------------|
| For legal services, I have agreed to accept .....           | \$ <b>3,200.00</b> |
| Prior to the filing of this statement I have received ..... | \$ <b>1,750.00</b> |
| Balance Due .....   | \$ <b>1,450.00</b> |

2. The source of the compensation paid to me was:  Debtor  Other (specify): \_\_\_\_\_
3. The source of compensation to be paid to me is:  Debtor  Other (specify): \_\_\_\_\_
4.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.  
 I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
  - b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
  - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
  - d. **Representation of the debtor in adversary proceedings and other contested bankruptcy matters;**
  - e. [Other provisions as needed]
6. By agreement with the debtor(s), the above disclosed fee does not include the following services:  
**No Representation of Debtors in Any Court Proceeding, Including, But Not Limited to, Relief From Stay Motions or Adversary Actions**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

March 14, 2014

Date

/s/ Ronald D. Halpern

Ronald D. Halpern 81192  
Ronald D. Halpern, Attorney at Law  
30011 Ivy Glenn Drive, Suite 112  
Laguna Niguel, CA 92677  
(949) 249-2922 Fax: (949) 495-0365  
ronhalpern@aol.com

IN RE:

Case No. \_\_\_\_\_

Erhard, Harold Helmut & Erhard, Francine Gail

Chapter 7

Debtor(s)

**SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE  | ATTACHED<br>(YES/NO) | NO. OF<br>SHEETS | ASSETS        | LIABILITIES   | OTHER       |
|---|----------------------|------------------|---------------|---------------|-------------|
| A - Real Property   | Yes                  | 1                | \$ 0.00       |               |             |
| B - Personal Property   | Yes                  | 3                | \$ 160,678.00 |               |             |
| C - Property Claimed as Exempt  | Yes                  | 1                |               |               |             |
| D - Creditors Holding Secured Claims  | Yes                  | 2                |               | \$ 131,600.00 |             |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes                  | 2                |               | \$ 66,000.00  |             |
| F - Creditors Holding Unsecured Nonpriority Claims                              | Yes                  | 14               |               | \$ 438,417.00 |             |
| G - Executory Contracts and Unexpired Leases                                    | Yes                  | 1                |               |               |             |
| H - Codebtors   | Yes                  | 1                |               |               |             |
| I - Current Income of Individual Debtor(s)                                      | Yes                  | 2                |               |               | \$ 0.00     |
| J - Current Expenditures of Individual Debtor(s)                                | Yes                  | 3                |               |               | \$ 5,000.00 |
| TOTAL   |                      | 30               | \$ 160,678.00 | \$ 636,017.00 |             |

**IN RE:**

Case No. \_\_\_\_\_

Erhard, Harold Helmut & Erhard, Francine Gail

Chapter 7 \_\_\_\_\_

Debtor(s)

**STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

| Type of Liability   | Amount              |
|---|---------------------|
| Domestic Support Obligations (from Schedule E)  | \$ <b>0.00</b>      |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)  | \$ <b>66,000.00</b> |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | \$ <b>0.00</b>      |
| Student Loan Obligations (from Schedule F)  | \$ <b>3,069.00</b>  |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E                   | \$ <b>0.00</b>      |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                           | \$ <b>0.00</b>      |
| <b>TOTAL</b>  | \$ <b>69,069.00</b> |

**State the following:**

|   |                    |
|---|--------------------|
| Average Income (from Schedule I, Line 12)   | \$ <b>0.00</b>     |
| Average Expenses (from Schedule J, Line 22)   | \$ <b>5,000.00</b> |
| Current Monthly Income (from Form 22A Line 12; <b>OR</b> , Form 22B Line 11; <b>OR</b> , Form 22C Line 20 ) | \$ <b>0.00</b>     |

**State the following:**

|  |                      |
|--|----------------------|
| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column               | \$ <b>18,800.00</b>  |
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.            | \$ <b>66,000.00</b>  |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | \$ <b>0.00</b>       |
| 4. Total from Schedule F   | \$ <b>438,417.00</b> |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               | \$ <b>457,217.00</b> |

## UNITED STATES BANKRUPTCY COURT

### NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a joint case (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### **1. Services Available from Credit Counseling Agencies**

**With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis.** The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

**In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge.** The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### **2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors**

##### **Chapter 7: Liquidation (\$245 filing fee, \$46 administrative fee, \$15 trustee surcharge: Total fee \$306)**

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a “means test” designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your

discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

**Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$46 administrative fee: Total fee \$281)**

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

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Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

**Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$46 administrative fee: Total fee \$246)**

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

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A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at [http://www.uscourts.gov/bkforms/bankruptcy\\_forms.html#procedure](http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure).

IN RE:

Case No. \_\_\_\_\_

Erhard, Harold Helmut & Erhard, Francine Gail

Chapter 7

Debtor(s)

**CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)  
UNDER § 342(b) OF THE BANKRUPTCY CODE**

**Certificate of [Non-Attorney] Bankruptcy Petition Preparer**

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor the attached notice, as required by § 342(b) of the Bankruptcy Code.

Printed Name and title, if any, of Bankruptcy Petition Preparer  
Address:

---

---

Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)  
(Required by 11 U.S.C. § 110.)

**X**

Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or partner whose Social Security number is provided above.

**Certificate of the Debtor**

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

Erhard, Harold Helmut & Erhard, Francine Gail

Printed Name(s) of Debtor(s)

**X /s/ Harold Helmut Erhard**

Signature of Debtor

**3/14/2014**

Date

Case No. (if known) \_\_\_\_\_

**X /s/ Francine Gail Erhard**

Signature of Joint Debtor (if any)

**3/14/2014**

Date

**Instructions:** Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

B22A (Official Form 22A) (Chapter 7) (04/13)

In re: **Erhard, Harold Helmut & Erhard, Francine Gail**  
 Debtor(s)

Case Number: \_\_\_\_\_  
 (If known)

According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this statement):

- The presumption arises  
 The presumption does not arise  
 The presumption is temporarily inapplicable.

## CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by § 707(b)(2)(C).

### Part I. MILITARY AND NON-CONSUMER DEBTORS

|    |   |
|----|---|
| 1A | <p><b>Disabled Veterans.</b> If you are a disabled veteran described in the Veteran's Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.</p> <p><input type="checkbox"/> <b>Declaration of Disabled Veteran.</b> By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).</p>   |
| 1B | <p><b>Non-consumer Debtors.</b> If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.</p> <p><input type="checkbox"/> <b>Declaration of non-consumer debts.</b> By checking this box, I declare that my debts are not primarily consumer debts.</p>   |
| 1C | <p><b>Reservists and National Guard Members; active duty or homeland defense activity.</b> Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. <b>During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.</b></p> <p><input type="checkbox"/> <b>Declaration of Reservists and National Guard Members.</b> By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard</p> <p>a. <input type="checkbox"/> I was called to active duty after September 11, 2001, for a period of at least 90 days and<br/> <input type="checkbox"/> I remain on active duty /or/<br/> <input type="checkbox"/> I was released from active duty on _____, which is less than 540 days before this bankruptcy case was filed;</p> <p style="text-align: center;">OR</p> <p>b. <input type="checkbox"/> I am performing homeland defense activity for a period of at least 90 days /or/<br/> <input type="checkbox"/> I performed homeland defense activity for a period of at least 90 days, terminating on _____, which is less than 540 days before this bankruptcy case was filed.</p> |

B22A (Official Form 22A) (Chapter 7) (04/13)

**Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION**

|   |   |                             |  |   |                 |                 |    |   |    |    |                                     |                             |
|---|---|-----------------------------|--|---|-----------------|-----------------|----|---|----|----|-------------------------------------|-----------------------------|
| 2   | <p><b>Marital/filing status.</b> Check the box that applies and complete the balance of this part of this statement as directed.</p> <p>a. <input type="checkbox"/> Unmarried. <b>Complete only Column A ("Debtor's Income") for Lines 3-11.</b></p> <p>b. <input type="checkbox"/> Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." <b>Complete only Column A ("Debtor's Income") for Lines 3-11.</b></p> <p>c. <input type="checkbox"/> Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. <b>Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.</b></p> <p>d. <input checked="" type="checkbox"/> Married, filing jointly. <b>Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.</b></p> |                             |  |   |                 |                 |    |   |    |    |                                     |                             |
| 3   | <p>All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.</p>  |                             |  |   |                 |                 |    |   |    |    |                                     |                             |
| 4   | <p><b>Income from the operation of a business, profession or farm.</b> Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. <b>Do not include any part of the business expenses entered on Line b as a deduction in Part V.</b></p> <table border="1" style="width: 100%;"> <tr> <td style="width: 10%;">a.</td> <td>Gross receipts</td> <td style="width: 10%;">\$</td> </tr> <tr> <td>b.</td> <td>Ordinary and necessary business expenses</td> <td>\$</td> </tr> <tr> <td>c.</td> <td>Business income</td> <td>Subtract Line b from Line a</td> </tr> </table>  |                             |  | a.  | Gross receipts  | \$              | b. | Ordinary and necessary business expenses  | \$ | c. | Business income                     | Subtract Line b from Line a |
| a.  | Gross receipts  | \$                          |  |   |                 |                 |    |   |    |    |                                     |                             |
| b.  | Ordinary and necessary business expenses  | \$                          |  |   |                 |                 |    |   |    |    |                                     |                             |
| c.  | Business income   | Subtract Line b from Line a |  |   |                 |                 |    |   |    |    |                                     |                             |
| 5   | <p><b>Rent and other real property income.</b> Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. <b>Do not include any part of the operating expenses entered on Line b as a deduction in Part V.</b></p> <table border="1" style="width: 100%;"> <tr> <td style="width: 10%;">a.</td> <td>Gross receipts</td> <td style="width: 10%;">\$</td> </tr> <tr> <td>b.</td> <td>Ordinary and necessary operating expenses</td> <td>\$</td> </tr> <tr> <td>c.</td> <td>Rent and other real property income</td> <td>Subtract Line b from Line a</td> </tr> </table>   |                             |  | a.  | Gross receipts  | \$              | b. | Ordinary and necessary operating expenses | \$ | c. | Rent and other real property income | Subtract Line b from Line a |
| a.  | Gross receipts  | \$                          |  |   |                 |                 |    |   |    |    |                                     |                             |
| b.  | Ordinary and necessary operating expenses   | \$                          |  |   |                 |                 |    |   |    |    |                                     |                             |
| c.  | Rent and other real property income   | Subtract Line b from Line a |  |   |                 |                 |    |   |    |    |                                     |                             |
| 6   | <p><b>Interest, dividends, and royalties.</b></p>   |                             |  |   |                 |                 |    |   |    |    |                                     |                             |
| 7   | <p><b>Pension and retirement income.</b></p>  |                             |  |   |                 |                 |    |   |    |    |                                     |                             |
| 8   | <p><b>Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose.</b> Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B.</p>  |                             |  |   |                 |                 |    |   |    |    |                                     |                             |
| 9   | <p><b>Unemployment compensation.</b> Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:</p> <table border="1" style="width: 100%;"> <tr> <td style="width: 33%;">Unemployment compensation claimed to be a benefit under the Social Security Act</td> <td style="width: 33%;">Debtor \$ _____</td> <td style="width: 33%;">Spouse \$ _____</td> </tr> </table>  |                             |  | Unemployment compensation claimed to be a benefit under the Social Security Act | Debtor \$ _____ | Spouse \$ _____ |    |   |    |    |                                     |                             |
| Unemployment compensation claimed to be a benefit under the Social Security Act | Debtor \$ _____   | Spouse \$ _____             |  |   |                 |                 |    |   |    |    |                                     |                             |

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|   |   |    |    |   |  |    |    |    |
|---|---|----|----|---|--|----|----|----|
| 10  | <b>Income from all other sources.</b> Specify source and amount. If necessary, list additional sources on a separate page. <b>Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance.</b> Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism. |    |    |   |  |    |    |    |
|   | a. <table border="1" style="width: 100%;"><tr><td style="width: 5%;"></td><td style="width: 90%; text-align: right;">\$</td></tr><tr><td>b. <table border="1" style="width: 100%;"><tr><td style="width: 5%;"></td><td style="width: 90%; text-align: right;">\$</td></tr></table></td></tr></table>  |    | \$ | b. <table border="1" style="width: 100%;"><tr><td style="width: 5%;"></td><td style="width: 90%; text-align: right;">\$</td></tr></table> |  | \$ | \$ | \$ |
|   | \$  |    |    |   |  |    |    |    |
| b. <table border="1" style="width: 100%;"><tr><td style="width: 5%;"></td><td style="width: 90%; text-align: right;">\$</td></tr></table> |   | \$ |    |   |  |    |    |    |
|   | \$  |    |    |   |  |    |    |    |
|   | Total and enter on Line 10  | \$ | \$ |   |  |    |    |    |
| 11  | <b>Subtotal of Current Monthly Income for § 707(b)(7).</b> Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s).  |    |    |   |  |    |    |    |
| 12  | <b>Total Current Monthly Income for § 707(b)(7).</b> If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.  |    |    |   |  |    |    |    |

**Part III. APPLICATION OF § 707(B)(7) EXCLUSION**

|    |   |  |  |
|----|---|--|--|
| 13 | <b>Annualized Current Monthly Income for § 707(b)(7).</b> Multiply the amount from Line 12 by the number 12 and enter the result.   |  |  |
| 14 | <b>Applicable median family income.</b> Enter the median family income for the applicable state and household size. (This information is available by family size at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)<br>a. Enter debtor's state of residence: <b>California</b> b. Enter debtor's household size: <b>5</b>   |  |  |
| 15 | <b>Application of Section 707(b)(7).</b> Check the applicable box and proceed as directed.<br><input checked="" type="checkbox"/> <b>The amount on Line 13 is less than or equal to the amount on Line 14.</b> Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI, or VII.<br><input type="checkbox"/> <b>The amount on Line 13 is more than the amount on Line 14.</b> Complete the remaining parts of this statement. |  |  |

**Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)**

|  |   |    |   |  |    |    |   |  |    |    |    |  |                             |    |    |    |  |  |  |
|--|---|----|---|--|----|----|---|--|----|----|----|--|-----------------------------|----|----|----|--|--|--|
| <b>Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2)</b>  |   |    |   |  |    |    |   |  |    |    |    |  |                             |    |    |    |  |  |  |
| 16   | <b>Enter the amount from Line 12.</b>   |    |   |  |    |    |   |  |    |    |    |  |                             |    |    |    |  |  |  |
| 17   | <b>Marital adjustment.</b> If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero.  |    |   |  |    |    |   |  |    |    |    |  |                             |    |    |    |  |  |  |
|  | a. <table border="1" style="width: 100%;"><tr><td style="width: 5%;"></td><td style="width: 90%; text-align: right;">\$</td></tr><tr><td>b. <table border="1" style="width: 100%;"><tr><td style="width: 5%;"></td><td style="width: 90%; text-align: right;">\$</td></tr><tr><td>c. <table border="1" style="width: 100%;"><tr><td style="width: 5%;"></td><td style="width: 90%; text-align: right;">\$</td></tr></table></td></tr></table></td> <td style="text-align: center; vertical-align: bottom;">\$</td> <td style="text-align: center; vertical-align: bottom;">\$</td> </tr> <tr> <td></td> <td>Total and enter on Line 17.</td> <td style="text-align: center; vertical-align: bottom;">\$</td> <td style="text-align: center; vertical-align: bottom;">\$</td> </tr> <tr> <td style="vertical-align: top;">18</td> <td><b>Current monthly income for § 707(b)(2).</b> Subtract Line 17 from Line 16 and enter the result.</td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> </tr> </table> |    | \$  | b. <table border="1" style="width: 100%;"><tr><td style="width: 5%;"></td><td style="width: 90%; text-align: right;">\$</td></tr><tr><td>c. <table border="1" style="width: 100%;"><tr><td style="width: 5%;"></td><td style="width: 90%; text-align: right;">\$</td></tr></table></td></tr></table> |    | \$ | c. <table border="1" style="width: 100%;"><tr><td style="width: 5%;"></td><td style="width: 90%; text-align: right;">\$</td></tr></table> |  | \$ | \$ | \$ |  | Total and enter on Line 17. | \$ | \$ | 18 | <b>Current monthly income for § 707(b)(2).</b> Subtract Line 17 from Line 16 and enter the result. |  |  |
|  | \$  |    |   |  |    |    |   |  |    |    |    |  |                             |    |    |    |  |  |  |
| b. <table border="1" style="width: 100%;"><tr><td style="width: 5%;"></td><td style="width: 90%; text-align: right;">\$</td></tr><tr><td>c. <table border="1" style="width: 100%;"><tr><td style="width: 5%;"></td><td style="width: 90%; text-align: right;">\$</td></tr></table></td></tr></table> |   | \$ | c. <table border="1" style="width: 100%;"><tr><td style="width: 5%;"></td><td style="width: 90%; text-align: right;">\$</td></tr></table> |  | \$ | \$ | \$  |  |    |    |    |  |                             |    |    |    |  |  |  |
|  | \$  |    |   |  |    |    |   |  |    |    |    |  |                             |    |    |    |  |  |  |
| c. <table border="1" style="width: 100%;"><tr><td style="width: 5%;"></td><td style="width: 90%; text-align: right;">\$</td></tr></table>  |   | \$ |   |  |    |    |   |  |    |    |    |  |                             |    |    |    |  |  |  |
|  | \$  |    |   |  |    |    |   |  |    |    |    |  |                             |    |    |    |  |  |  |
|  | Total and enter on Line 17.   | \$ | \$  |  |    |    |   |  |    |    |    |  |                             |    |    |    |  |  |  |
| 18   | <b>Current monthly income for § 707(b)(2).</b> Subtract Line 17 from Line 16 and enter the result.  |    |   |  |    |    |   |  |    |    |    |  |                             |    |    |    |  |  |  |

**Part V. CALCULATION OF DEDUCTIONS FROM INCOME****Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)**

|     |  |  |  |
|-----|--|--|--|
| 19A | <b>National Standards: food, clothing and other items.</b> Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable number of persons. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. |  |  |
|-----|--|--|--|

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| 19B                                  | <p><b>National Standards: health care.</b> Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2"><b>Persons under 65 years of age</b></th> <th colspan="2"><b>Persons 65 years of age or older</b></th> </tr> </thead> <tbody> <tr> <td>a1.</td> <td>Allowance per person</td> <td>a2.</td> <td>Allowance per person</td> </tr> <tr> <td>b1.</td> <td>Number of persons</td> <td>b2.</td> <td>Number of persons</td> </tr> <tr> <td>c1.</td> <td>Subtotal</td> <td>c2.</td> <td>Subtotal</td> </tr> </tbody> </table> | <b>Persons under 65 years of age</b>    |  | <b>Persons 65 years of age or older</b> |    | a1.  | Allowance per person | a2. | Allowance per person        | b1.                         | Number of persons | b2. | Number of persons | c1. | Subtotal | c2. | Subtotal | \$ |
|--------------------------------------|---|---|--|---|----|--|----------------------|-----|-----------------------------|-----------------------------|-------------------|-----|-------------------|-----|----------|-----|----------|----|
| <b>Persons under 65 years of age</b> |   | <b>Persons 65 years of age or older</b> |  |   |    |  |                      |     |                             |                             |                   |     |                   |     |          |     |          |    |
| a1.                                  | Allowance per person  | a2.                                     | Allowance per person   |   |    |  |                      |     |                             |                             |                   |     |                   |     |          |     |          |    |
| b1.                                  | Number of persons   | b2.                                     | Number of persons  |   |    |  |                      |     |                             |                             |                   |     |                   |     |          |     |          |    |
| c1.                                  | Subtotal  | c2.                                     | Subtotal   |   |    |  |                      |     |                             |                             |                   |     |                   |     |          |     |          |    |
| 20A                                  | <p><b>Local Standards: housing and utilities; non-mortgage expenses.</b> Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.</p>   | \$                                      |  |   |    |  |                      |     |                             |                             |                   |     |                   |     |          |     |          |    |
| 20B                                  | <p><b>Local Standards: housing and utilities; mortgage/rent expense.</b> Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court)(the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. <b>Do not enter an amount less than zero.</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>a.</td> <td>IRS Housing and Utilities Standards; mortgage/rental expense</td> <td>\$</td> </tr> <tr> <td>b.</td> <td>Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42</td> <td>\$</td> </tr> <tr> <td>c.</td> <td>Net mortgage/rental expense</td> <td>Subtract Line b from Line a</td> </tr> </table>   | a.                                      | IRS Housing and Utilities Standards; mortgage/rental expense | \$                                      | b. | Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42 | \$                   | c.  | Net mortgage/rental expense | Subtract Line b from Line a | \$                |     |                   |     |          |     |          |    |
| a.                                   | IRS Housing and Utilities Standards; mortgage/rental expense  | \$                                      |  |   |    |  |                      |     |                             |                             |                   |     |                   |     |          |     |          |    |
| b.                                   | Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42  | \$                                      |  |   |    |  |                      |     |                             |                             |                   |     |                   |     |          |     |          |    |
| c.                                   | Net mortgage/rental expense   | Subtract Line b from Line a             |  |   |    |  |                      |     |                             |                             |                   |     |                   |     |          |     |          |    |
| 21                                   | <p><b>Local Standards: housing and utilities; adjustment.</b> If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:</p>  | \$                                      |  |   |    |  |                      |     |                             |                             |                   |     |                   |     |          |     |          |    |
| 22A                                  | <p><b>Local Standards: transportation; vehicle operation/public transportation expense.</b> You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.</p> <p>Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8.</p> <p><input type="checkbox"/> 0   <input type="checkbox"/> 1   <input type="checkbox"/> 2 or more.</p> <p>If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)</p>   | \$                                      |  |   |    |  |                      |     |                             |                             |                   |     |                   |     |          |     |          |    |

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|     |   |                             |   |    |    |  |    |    |   |                             |    |
|-----|---|-----------------------------|---|----|----|--|----|----|---|-----------------------------|----|
| 22B | <p><b>Local Standards: transportation; additional public transportation expense.</b> If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)</p>   | \$                          |   |    |    |  |    |    |   |                             |    |
| 23  | <p><b>Local Standards: transportation ownership/lease expense; Vehicle 1.</b> Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)</p> <p><input type="checkbox"/> 1   <input type="checkbox"/> 2 or more.</p> <p>Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. <b>Do not enter an amount less than zero.</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">a.</td> <td style="width: 80%;">IRS Transportation Standards, Ownership Costs</td> <td style="width: 10%; text-align: center;">\$</td> </tr> <tr> <td>b.</td> <td>Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42</td> <td style="text-align: center;">\$</td> </tr> <tr> <td>c.</td> <td>Net ownership/lease expense for Vehicle 1</td> <td style="text-align: center;">Subtract Line b from Line a</td> </tr> </table> | a.                          | IRS Transportation Standards, Ownership Costs             | \$ | b. | Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42 | \$ | c. | Net ownership/lease expense for Vehicle 1 | Subtract Line b from Line a | \$ |
| a.  | IRS Transportation Standards, Ownership Costs   | \$                          |   |    |    |  |    |    |   |                             |    |
| b.  | Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42  | \$                          |   |    |    |  |    |    |   |                             |    |
| c.  | Net ownership/lease expense for Vehicle 1   | Subtract Line b from Line a |   |    |    |  |    |    |   |                             |    |
| 24  | <p><b>Local Standards: transportation ownership/lease expense; Vehicle 2.</b> Complete this Line only if you checked the "2 or more" Box in Line 23.</p> <p>Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. <b>Do not enter an amount less than zero.</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">a.</td> <td style="width: 80%;">IRS Transportation Standards, Ownership Costs, Second Car</td> <td style="width: 10%; text-align: center;">\$</td> </tr> <tr> <td>b.</td> <td>Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42</td> <td style="text-align: center;">\$</td> </tr> <tr> <td>c.</td> <td>Net ownership/lease expense for Vehicle 2</td> <td style="text-align: center;">Subtract Line b from Line a</td> </tr> </table>  | a.                          | IRS Transportation Standards, Ownership Costs, Second Car | \$ | b. | Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42 | \$ | c. | Net ownership/lease expense for Vehicle 2 | Subtract Line b from Line a | \$ |
| a.  | IRS Transportation Standards, Ownership Costs, Second Car   | \$                          |   |    |    |  |    |    |   |                             |    |
| b.  | Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42  | \$                          |   |    |    |  |    |    |   |                             |    |
| c.  | Net ownership/lease expense for Vehicle 2   | Subtract Line b from Line a |   |    |    |  |    |    |   |                             |    |
| 25  | <p><b>Other Necessary Expenses: taxes.</b> Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. <b>Do not include real estate or sales taxes.</b></p>   | \$                          |   |    |    |  |    |    |   |                             |    |
| 26  | <p><b>Other Necessary Expenses: involuntary deductions for employment.</b> Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. <b>Do not include discretionary amounts, such as voluntary 401(k) contributions.</b></p>  | \$                          |   |    |    |  |    |    |   |                             |    |
| 27  | <p><b>Other Necessary Expenses: life insurance.</b> Enter total average monthly premiums that you actually pay for term life insurance for yourself. <b>Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.</b></p>  | \$                          |   |    |    |  |    |    |   |                             |    |
| 28  | <p><b>Other Necessary Expenses: court-ordered payments.</b> Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. <b>Do not include payments on past due obligations included in Line 44.</b></p>   | \$                          |   |    |    |  |    |    |   |                             |    |
| 29  | <p><b>Other Necessary Expenses: education for employment or for a physically or mentally challenged child.</b> Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.</p>   | \$                          |   |    |    |  |    |    |   |                             |    |
| 30  | <p><b>Other Necessary Expenses: childcare.</b> Enter the total average monthly amount that you actually expend on childcare — such as baby-sitting, day care, nursery and preschool. <b>Do not include other educational payments.</b></p>  | \$                          |   |    |    |  |    |    |   |                             |    |
| 31  | <p><b>Other Necessary Expenses: health care.</b> Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. <b>Do not include payments for health insurance or health savings accounts listed in Line 34.</b></p>   | \$                          |   |    |    |  |    |    |   |                             |    |

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|  |   |                        |    |    |
|--|---|------------------------|----|----|
| 32   | <b>Other Necessary Expenses: telecommunication services.</b> Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service — such as pagers, call waiting, caller id, special long distance, or internet service — to the extent necessary for your health and welfare or that of your dependents. <b>Do not include any amount previously deducted.</b>  |                        | \$ |    |
| 33   | <b>Total Expenses Allowed under IRS Standards.</b> Enter the total of Lines 19 through 32.  |                        | \$ |    |
| <b>Subpart B: Additional Living Expense Deductions</b><br><b>Note: Do not include any expenses that you have listed in Lines 19-32</b> |   |                        |    |    |
| 34   | <b>Health Insurance, Disability Insurance, and Health Savings Account Expenses.</b> List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.   |                        |    |    |
|  | a.  | Health Insurance       | \$ |    |
|  | b.  | Disability Insurance   | \$ |    |
|  | c.  | Health Savings Account | \$ |    |
| Total and enter on Line 34   |   |                        | \$ |    |
| <b>If you do not actually expend this total amount,</b> state your actual total average monthly expenditures in the space below:       |   |                        |    |    |
| \$ _____   |   |                        |    |    |
| 35   | <b>Continued contributions to the care of household or family members.</b> Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.  |                        |    | \$ |
| 36   | <b>Protection against family violence.</b> Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.   |                        |    | \$ |
| 37   | <b>Home energy costs.</b> Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. <b>You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.</b>   |                        |    | \$ |
| 38   | <b>Education expenses for dependent children less than 18.</b> Enter the total average monthly expenses that you actually incur, not to exceed \$156.25* per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. <b>You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.</b>            |                        |    | \$ |
| 39   | <b>Additional food and clothing expense.</b> Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) <b>You must demonstrate that the additional amount claimed is reasonable and necessary.</b> |                        |    | \$ |
| 40   | <b>Continued charitable contributions.</b> Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).   |                        |    | \$ |
| 41   | <b>Total Additional Expense Deductions under § 707(b).</b> Enter the total of Lines 34 through 40   |                        |    | \$ |

\* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

## B22A (Official Form 22A) (Chapter 7) (04/13)

## Subpart C: Deductions for Debt Payment

|  |   |                               |                           |  |    |
|--|---|-------------------------------|---------------------------|--|----|
|  | <b>Future payments on secured claims.</b> For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.  |                               |                           |  |    |
| 42   | Name of Creditor  | Property Securing the Debt    | Average Monthly Payment   | Does payment include taxes or insurance?                 |    |
|  | a.  |                               | \$                        | <input type="checkbox"/> yes <input type="checkbox"/> no |    |
|  | b.  |                               | \$                        | <input type="checkbox"/> yes <input type="checkbox"/> no |    |
|  | c.  |                               | \$                        | <input type="checkbox"/> yes <input type="checkbox"/> no |    |
|  |   | Total: Add lines a, b and c.  |                           |  | \$ |
|  | <b>Other payments on secured claims.</b> If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. |                               |                           |  |    |
| 43   | Name of Creditor  | Property Securing the Debt    | 1/60th of the Cure Amount |  |    |
|  | a.  |                               | \$                        |  |    |
|  | b.  |                               | \$                        |  |    |
|  | c.  |                               | \$                        |  |    |
|  |   | Total: Add lines a, b and c.  |                           |  | \$ |
| 44   | <b>Payments on prepetition priority claims.</b> Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. <b>Do not include current obligations, such as those set out in Line 28.</b>  |                               |                           |  |    |
|  | <b>Chapter 13 administrative expenses.</b> If you are eligible to file a case under chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense.  |                               |                           |  |    |
| 45   | a. Projected average monthly chapter 13 plan payment.   |                               | \$                        |  |    |
|  | b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)   |                               | X                         |  |    |
|  | c. Average monthly administrative expense of chapter 13 case  | Total: Multiply Lines a and b |                           |  | \$ |
| 46   | <b>Total Deductions for Debt Payment.</b> Enter the total of Lines 42 through 45.   |                               |                           |  | \$ |
| <b>Subpart D: Total Deductions from Income</b> |   |                               |                           |  |    |
| 47   | <b>Total of all deductions allowed under § 707(b)(2).</b> Enter the total of Lines 33, 41, and 46.  |                               |                           |  | \$ |

B22A (Official Form 22A) (Chapter 7) (04/13)

**Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION**

|   |  |    |
|---|--|----|
| 48  | <b>Enter the amount from Line 18 (Current monthly income for § 707(b)(2))</b>  | \$ |
| 49  | <b>Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))</b>   | \$ |
| 50  | <b>Monthly disposable income under § 707(b)(2).</b> Subtract Line 49 from Line 48 and enter the result.  | \$ |
| 51  | <b>60-month disposable income under § 707(b)(2).</b> Multiply the amount in Line 50 by the number 60 and enter the result.   | \$ |
| <b>Initial presumption determination.</b> Check the applicable box and proceed as directed.   |  |    |
| 52  | <input type="checkbox"/> <b>The amount on Line 51 is less than \$7,475*.</b> Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.                                    |    |
|   | <input type="checkbox"/> <b>The amount set forth on Line 51 is more than \$12,475*.</b> Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI. |    |
|   | <input type="checkbox"/> <b>The amount on Line 51 is at least \$7,475*, but not more than \$12,475*.</b> Complete the remainder of Part VI (Lines 53 though 55).   |    |
| 53  | <b>Enter the amount of your total non-priority unsecured debt</b>  | \$ |
| 54  | <b>Threshold debt payment amount.</b> Multiply the amount in Line 53 by the number 0.25 and enter the result.  | \$ |
| <b>Secondary presumption determination.</b> Check the applicable box and proceed as directed. |  |    |
| 55  | <input type="checkbox"/> <b>The amount on Line 51 is less than the amount on Line 54.</b> Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.   |    |
|   | <input type="checkbox"/> <b>The amount on Line 51 is equal to or greater than the amount on Line 54.</b> Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.                          |    |

**Part VII. ADDITIONAL EXPENSE CLAIMS**

|    |   |                |
|----|---|----------------|
| 56 | <b>Other Expenses.</b> List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses. |                |
|    | Expense Description   | Monthly Amount |
| a. |   | \$             |
| b. |   | \$             |
| c. |   | \$             |
|    | Total: Add Lines a, b and c   | \$             |

**Part VIII. VERIFICATION**

|    |  |  |
|----|--|--|
| 57 | I declare under penalty of perjury that the information provided in this statement is true and correct. ( <i>If this a joint case, both debtors must sign.</i> ) |  |
|    | Date: <u>March 14, 2014</u>  | Signature: <u>/s/ Harold Helmut Erhard</u><br>(Debtor)               |
|    | Date: <u>March 14, 2014</u>  | Signature: <u>/s/ Francine Gail Erhard</u><br>(Joint Debtor, if any) |

\* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

IN RE:

Case No. \_\_\_\_\_

Erhard, Harold Helmut

Chapter 7

Debtor(s)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE  
CREDIT COUNSELING REQUIREMENT**

**Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.**

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

**If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.**

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Harold Helmut Erhard

Date: March 14, 2014

IN RE:

Case No. \_\_\_\_\_

Erhard, Francine Gail

Chapter 7

Debtor(s)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE  
CREDIT COUNSELING REQUIREMENT**

**Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.**

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

**If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.**

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Francine Gail Erhard

Date: March 14, 2014

IN RE **Erhard, Harold Helmut & Erhard, Francine Gail**

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| DESCRIPTION AND LOCATION OF PROPERTY | NATURE OF DEBTOR'S INTEREST IN PROPERTY | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION | AMOUNT OF SECURED CLAIM  |
|--------------------------------------|---|---------------------------------------|---|--------------------------|
| <b>None</b>                          |   |                                       |   |                          |
|                                      |   |                                       |   | <b>TOTAL</b> <b>0.00</b> |

(Report also on Summary of Schedules)

**SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| TYPE OF PROPERTY  | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION OF PROPERTY   | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST IN<br>PROPERTY WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM OR<br>EXEMPTION |
|---|------------------|--|---------------------------------------|--|
| 1. Cash on hand.  |                  | <b>Cash on the Persons of the Debtors</b>                                      | C                                     | 100.00   |
| 2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.                       |                  | <b>Checking Acct., at U.S. Bank, Dana Pt., CA</b>                              | H                                     | 42.00  |
| 3. Security deposits with public utilities, telephone companies, landlords, and others.   |                  | <b>Checking Acct., at Wells Fargo Bank, Mission Viejo, CA</b>                  | C                                     | 186.00   |
| 4. Household goods and furnishings, include audio, video, and computer equipment.   |                  | <b>Savings Acct., at Wells Fargo Bank, Mission Viejo, CA</b>                   | C                                     | 50.00  |
| 5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.   |                  | <b>Security Deposit with Debtors' Residence Landlord</b>                       | C                                     | 1,150.00   |
| 6. Wearing apparel.   |                  | <b>Misc. Household Goods and Furnishings, at the Debtors' Residence</b>        | C                                     | 3,000.00   |
| 7. Furs and jewelry.  |                  | <b>Misc. Books and Art Prints, at the Debtors' Residence</b>                   | C                                     | 100.00   |
| 8. Firearms and sports, photographic, and other hobby equipment.  |                  | <b>Misc. Wearing Apparel, at the Debtors' Residence</b>                        | C                                     | 200.00   |
| 9. Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.   | X                | <b>Misc. Jewelry (e.g., Rings, Necklaces, etc.), at the Debtors' Residence</b> | C                                     | 300.00   |
| 10. Annuities. Itemize and name each issue.   | X                | <b>Misc. Sports Equipment, at the Debtors' Residence</b>                       | C                                     | 50.00  |
| 11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X                |  |                                       |  |
| 12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.   | X                |  |                                       |  |
| 13. Stock and interests in incorporated and unincorporated businesses. Itemize.   |                  | <b>Misc. Common Stock Holdings</b>   | C                                     | 9,200.00   |

IN RE Erhard, Harold Helmut &amp; Erhard, Francine Gail

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**SCHEDULE B - PERSONAL PROPERTY**  
**(Continuation Sheet)**

| TYPE OF PROPERTY  | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION OF PROPERTY  | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |                  |
|---|------------------|---|---|------------------|
|   |                  |   | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY   |                  |
| 14. Interests in partnerships or joint ventures. Itemize.   | X                |   |   |                  |
| 15. Government and corporate bonds and other negotiable and non-negotiable instruments.   | X                |   |   |                  |
| 16. Accounts receivable.  |                  | <b>Misc. Accts. Receivable, Most Probably Uncollectable, From Debtor's Former Business</b>  | H   | <b>29,400.00</b> |
| 17. Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.  | X                |   |   |                  |
| 18. Other liquidated debts owed to debtor including tax refunds. Give particulars.  | X                |   |   |                  |
| 19. Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.   | X                |   |   |                  |
| 20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.  | X                |   |   |                  |
| 21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.  | X                |   |   |                  |
| 22. Patents, copyrights, and other intellectual property. Give particulars.   | X                |   |   |                  |
| 23. Licenses, franchises, and other general intangibles. Give particulars.  | X                |   |   |                  |
| 24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X                |   |   |                  |
| 25. Automobiles, trucks, trailers, and other vehicles and accessories.  |                  | <b>2001 Toyota Four Runner, Fair Condition</b>  | C   | <b>2,000.00</b>  |
|   |                  | <b>2004 Mercedes Benz CLK500, Good Condition</b>  | C   | <b>32,000.00</b> |
|   |                  | <b>2005 Chevrolet Silverado Pickup Truck, Good Condition</b>                                | C   | <b>6,600.00</b>  |
| 26. Boats, motors, and accessories.   | X                |   |   |                  |
| 27. Aircraft and accessories.   | X                |   |   |                  |
| 28. Office equipment, furnishings, and supplies.  |                  | <b>Misc. Office Equipment (e.g., Desks, Chairs, etc.), Used in Debtor's Former Business</b> | H   | <b>500.00</b>    |
| 29. Machinery, fixtures, equipment, and supplies used in business.  |                  | <b>Misc. Masonry Blocks and Stones Used in Debtor's Former Business</b>                     | H   | <b>800.00</b>    |
| 30. Inventory.  | X                |   |   |                  |

**IN RE Erhard, Harold Helmut & Erhard, Francine Gail**

**Case No.**

**Debtor(s)**

(If known)

**SCHEDULE B - PERSONAL PROPERTY  
(Continuation Sheet)**

**0** continuation sheets attached

(Include amounts from any continuation sheets attached.  
Report total also on Summary of Schedules.)

**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**

Debtor elects the exemptions to which debtor is entitled under:  
(Check one box)

- 11 U.S.C. § 522(b)(2)  
 11 U.S.C. § 522(b)(3)

Check if debtor claims a homestead exemption that exceeds \$155,675. \*

| DESCRIPTION OF PROPERTY  | SPECIFY LAW PROVIDING EACH EXEMPTION | VALUE OF CLAIMED EXEMPTION | CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS |
|--|--------------------------------------|----------------------------|--|
| <b><u>SCHEDULE B - PERSONAL PROPERTY</u></b>   |                                      |                            |  |
| Cash on the Persons of the Debtors   | CCCP § 703.140(b)(5)                 | 100.00                     | 100.00   |
| Checking Acct., at U.S. Bank, Dana Pt., CA   | CCCP § 703.140(b)(5)                 | 42.00                      | 42.00  |
| Checking Acct., at Wells Fargo Bank, Mission Viejo, CA                               | CCCP § 703.140(b)(5)                 | 186.00                     | 186.00   |
| Savings Acct., at Wells Fargo Bank, Mission Viejo, CA                                | CCCP § 703.140(b)(5)                 | 50.00                      | 50.00  |
| Security Deposit with Debtors' Residence Landlord                                    | CCCP § 703.140(b)(5)                 | 1,150.00                   | 1,150.00   |
| Misc. Household Goods and Furnishings, at the Debtors' Residence                     | CCCP § 703.140(b)(3)                 | 3,000.00                   | 3,000.00   |
| Misc. Books and Art Prints, at the Debtors' Residence                                | CCCP § 703.140(b)(3)                 | 100.00                     | 100.00   |
| Misc. Wearing Apparel, at the Debtors' Residence                                     | CCCP § 703.140(b)(3)                 | 200.00                     | 200.00   |
| Misc. Jewelry (e.g., Rings, Necklaces, etc.), at the Debtors' Residence              | CCCP § 703.140(b)(4)                 | 300.00                     | 300.00   |
| Misc. Sports Equipment, at the Debtors' Residence                                    | CCCP § 703.140(b)(3)                 | 50.00                      | 50.00  |
| Misc. Common Stock Holdings  | CCCP § 703.140(b)(5)                 | 9,200.00                   | 9,200.00   |
| 2004 Mercedes Benz CLK500, Good Condition  | CCCP § 703.140(b)(2)                 | 3,000.00                   | 32,000.00  |
| Misc. Office Equipment (e.g., Desks, Chairs, etc.), Used in Debtor's Former Business | CCCP § 703.140(b)(5)                 | 500.00                     | 500.00   |
| Misc. Masonry Blocks and Stones Used in Debtor's Former Business                     | CCCP § 703.140(b)(6)                 | 800.00                     | 800.00   |

\* Amount subject to adjustment on 4/1/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS<br>INCLUDING ZIP CODE AND ACCOUNT NUMBER.<br><i>(See Instructions Above.)</i> | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED,<br>NATURE OF LIEN, AND DESCRIPTION AND VALUE OF<br>PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF<br>CLAIM WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF ANY |
|---|----------|---------------------------------------|--|------------|--------------|----------|---|------------------------------|
|   |          |                                       |  |            |              |          |   |                              |
| ACCOUNT NO. <b>10620911574153</b>   | C        |                                       | <b>2006-Loan, Secured by Purchase Money Security Interest in the Debtors' Toyota Vehicle</b>         |            |              |          | <b>7,400.00</b>   | <b>5,400.00</b>              |
| Chase National Bank<br>Box 36520<br>Louisville, KY 40233-6520   |          |                                       | VALUE \$ <b>2,000.00</b>   |            |              |          |   |                              |
| ACCOUNT NO. <b>614101</b>   | C        |                                       | <b>2005-Timeshare, Secured by Purchase Money Security Interest</b>                                   |            |              |          | <b>16,000.00</b>  | <b>1,000.00</b>              |
| Diamond Resorts<br>10600 West Carleton Blvd.<br>Las Vegas, NV 89135   |          |                                       | VALUE \$ <b>15,000.00</b>  |            |              |          |   |                              |
| ACCOUNT NO. <b>861720</b>   | C        |                                       | <b>2006-Purchase Money Security Interest in Lahina Timeshare</b>                                     |            |              |          | <b>53,000.00</b>  | <b>8,000.00</b>              |
| Diamond Resorts<br>10600 West Carleton Blvd.<br>Las Vegas, NV 89135   |          |                                       | VALUE \$ <b>45,000.00</b>  |            |              |          |   |                              |
| ACCOUNT NO. <b>06190669184</b>  | C        |                                       | <b>2004-Loan, Secured by Purchase Money Security Interest in the Debtors' Truck</b>                  |            |              |          | <b>10,000.00</b>  | <b>3,400.00</b>              |
| GMAC<br>Box 78234<br>Phoenix, AZ 85062-8234   |          |                                       | VALUE \$ <b>6,600.00</b>   |            |              |          |   |                              |

1 continuation sheets attached

Subtotal  
(Total of this page) \$ **86,400.00** \$ **17,800.00**

Total  
(Use only on last page) \$

(Report also on  
Summary of  
Schedules.) (If applicable, report  
also on Statistical  
Summary of Certain  
Liabilities and Related  
Data.)

IN RE Erhard, Harold Helmut & Erhard, Francine Gail

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**  
**(Continuation Sheet)**

| CREDITOR'S NAME AND MAILING ADDRESS<br>INCLUDING ZIP CODE AND ACCOUNT NUMBER.<br><i>(See Instructions Above.)</i> | CODEBTOR<br><br>HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED,<br>NATURE OF LIEN, AND DESCRIPTION AND VALUE OF<br>PROPERTY SUBJECT TO LIEN | AMOUNT OF<br>CLAIM WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL |              |          | UNSECURED<br>PORTION, IF ANY |
|---|---|--|---|--------------|----------|------------------------------|
|   |   |  | CONTINGENT  | UNLIQUIDATED | DISPUTED |                              |
| ACCOUNT NO. <b>6-9811</b>   | <b>C</b>  | <b>2004-Purchase Money Security Interest in Timeshare</b>  |   |              |          | <b>16,000.00</b>             |
| <b>HTS-Lake Tahoe, Inc.<br/>450 Carillon Pkwy.<br/>#210<br/>St. Petersburg, FL 33716</b>                          |   | <b>VALUE \$ 15,000.00</b>  |   |              |          | <b>1,000.00</b>              |
| ACCOUNT NO. <b>0000263104</b>   | <b>W</b>  | <b>2006-Loan, Secured by Purchase Money Security Interest in the Debtors' Mercedes Automobile</b>    |   |              |          | <b>29,200.00</b>             |
| <b>Schools First Credit Union<br/>Box 11547<br/>Santa Ana, CA 92711</b>   |   | <b>VALUE \$ 32,000.00</b>  |   |              |          |                              |
| ACCOUNT NO.   |   |  |   |              |          |                              |
|   |   | <b>VALUE \$</b>  |   |              |          |                              |
| ACCOUNT NO.   |   |  |   |              |          |                              |
|   |   | <b>VALUE \$</b>  |   |              |          |                              |
| ACCOUNT NO.   |   |  |   |              |          |                              |
|   |   | <b>VALUE \$</b>  |   |              |          |                              |
| ACCOUNT NO.   |   |  |   |              |          |                              |
|   |   | <b>VALUE \$</b>  |   |              |          |                              |

Sheet no. 1 of 1 continuation sheets attached to  
Schedule of Creditors Holding Secured Claims

|                                  |                      |                     |
|----------------------------------|----------------------|---------------------|
| Subtotal<br>(Total of this page) | \$ <b>45,200.00</b>  | \$ <b>1,000.00</b>  |
| Total<br>(Use only on last page) | \$ <b>131,600.00</b> | \$ <b>18,800.00</b> |

(Report also on  
Summary of  
Schedules.)  
(If applicable, report  
also on Statistical  
Summary of Certain  
Liabilities and Related  
Data.)

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

### TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

**Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

**Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

**Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

**Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

**Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$6,150\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

**Deposits by individuals**

Claims of individuals up to \$2,775\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

**Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

**Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

**Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

IN RE Erhard, Harold Helmut &amp; Erhard, Francine Gail

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**  
**(Continuation Sheet)****Taxes and Other Certain Debts Owed to Governmental Units**

(Type of Priority for Claims Listed on This Sheet)

| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE AND ACCOUNT NUMBER.<br>(See Instructions above.)                     | CODEBTOR<br>HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED<br>AND CONSIDERATION FOR CLAIM  | CONTINGENT<br>UNLIQUIDATED<br>DISPUTED | AMOUNT<br>OF<br>CLAIM | AMOUNT<br>ENTITLED<br>TO<br>PRIORITY | AMOUNT<br>NOT<br>ENTITLED<br>TO<br>PRIORITY,<br>IF ANY |
|---|---|---|--|-----------------------|--------------------------------------|--|
| ACCOUNT NO. <b>xxx xx 3976</b><br><b>Franchise Tax Board</b><br><b>Box 942867</b><br><b>Sacramento, CA 94267-0031</b>       | C   | <b>2006-2007-Unpaid State Income Taxes</b>  |  | 7,000.00              | 7,000.00                             |  |
| ACCOUNT NO. <b>xxx xx 3976</b><br><b>Internal Revenue Service</b><br><b>Box 21126</b><br><b>Philadelphia, PA 19114-0326</b> | C   | <b>2006-Unpaid Federal Income Taxes</b>   |  | 16,000.00             | 16,000.00                            |  |
| ACCOUNT NO. <b>xxx xx 3976</b><br><b>Internal Revenue Service</b><br><b>Box 21126</b><br><b>Philadelphia, PA 19114-0326</b> | C   | <b>2007-Unpaid Federal Income Taxes</b>   |  | 43,000.00             | 43,000.00                            |  |
| ACCOUNT NO.   |   |   |  |                       |                                      |  |
| ACCOUNT NO.   |   |   |  |                       |                                      |  |
| ACCOUNT NO.   |   |   |  |                       |                                      |  |
| Sheet no. <b>1</b> of <b>1</b> continuation sheets attached to<br>Schedule of Creditors Holding Unsecured Priority Claims   |   | Subtotal<br>(Totals of this page)   |  | \$ <b>66,000.00</b>   | \$ <b>66,000.00</b>                  | \$   |
|   |   | Total<br>(Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)  |  | \$ <b>66,000.00</b>   |                                      |  |
|   |   | Total<br>(Use only on last page of the completed Schedule E. If applicable,<br>report also on the Statistical Summary of Certain Liabilities and Related Data.) |  |                       | \$ <b>66,000.00</b>                  | \$   |

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br><i>(See Instructions Above.)</i>                   | CODEBTOR<br>HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE | CONTINGENT  | UNLIQUIDATED | DISPUTED        | AMOUNT<br>OF<br>CLAIM |
|---|---|--|---|--------------|-----------------|-----------------------|
|   |   |  |   |              |                 |                       |
| ACCOUNT NO. <b>Erhard Masonry</b><br><br><b>A&amp;L Builders Supply, Inc.</b><br><b>Box 1833</b><br><b>Apple Valley, CA 92307</b> | H   | <b>1/09-Unpaid Materials</b>   |   |              |                 | <b>500.00</b>         |
| ACCOUNT NO. <b>Erhard Masonry</b><br><br><b>A.V. Auto Glass</b><br><b>22264 Ottawa</b><br><b>Apple Valley, CA 92307</b>           | H   | <b>2008-Unpaid Materials</b>   |   |              |                 | <b>1,300.00</b>       |
| ACCOUNT NO. <b>5659439761</b><br><br><b>ACS, Inc.</b><br><b>Box 9001561</b><br><b>Louisville, KY 40290</b>                        | H   | <b>2001-Student Loan</b>   |   |              |                 | <b>3,069.00</b>       |
| ACCOUNT NO. <b>372 733732 51002</b><br><br><b>American Express</b><br><b>Box 0001</b><br><b>Los Angeles, CA 90096</b>             | H   | <b>2/09-Credit Card</b>  |   |              |                 | <b>2,500.00</b>       |
| <b>13</b> continuation sheets attached  |   |  | Subtotal<br>(Total of this page)  | \$           | <b>7,369.00</b> |                       |
|   |   |  | Total<br>(Use only on last page of the completed Schedule F. Report also on<br>the Summary of Schedules and, if applicable, on the Statistical<br>Summary of Certain Liabilities and Related Data.) | \$           |                 |                       |

IN RE Erhard, Harold Helmut &amp; Erhard, Francine Gail

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br><i>(See Instructions Above.)</i>  | CODEBTOR<br>HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE | CONTINGENT   | UNLIQUIDATED        | AMOUNT<br>OF<br>CLAIM |
|--|---|--|--|---------------------|-----------------------|
|  |   |  |  |                     |                       |
| ACCOUNT NO. <b>3713-234472-32007</b><br><br><b>American Express</b><br><b>Box 0001</b><br><b>Los Angeles, CA 90096</b>                                 | W   | 1/09-Credit Card   |  |                     | 7,950.00              |
| ACCOUNT NO. <b>HELERH</b><br><br><b>Angelus Block</b><br><b>11374 Tuxford</b><br><b>Sun Valley, CA 91352</b>   | H   | 4/09-Unpaid Materials  |  |                     | 22,000.00             |
| ACCOUNT NO. <b>BG 422950</b><br><br><b>Arco Gas</b><br><b>Box 70887</b><br><b>Charlotte, NC 28272</b>  | H   | 2008-Credit Card   |  |                     | 10,500.00             |
| ACCOUNT NO.<br><br><b>Focus Receivables Mgmt., LLC</b><br><b>Box 725069</b><br><b>Atlanta, GA 31139</b>  |   | Assignee or other notification for:<br><br>Arco Gas  |  |                     |                       |
| ACCOUNT NO. <b>7600000730091</b><br><br><b>Arrowhead General Ins. Agency</b><br><b>2365 Northside Dr.</b><br><b>#450</b><br><b>San Diego, CA 92108</b> | H   | 2008-Unpaid Workman's Comp. Premiums   |  |                     | unknown               |
| ACCOUNT NO. <b>4192-0000-0524-0528</b><br><br><b>Bank Of America</b><br><b>Box 15726</b><br><b>Wilmington, DE 19886-5726</b>                           | H   | 2008-Credit Card   |  |                     | 21,127.00             |
| ACCOUNT NO.<br><br><b>Collectors Interchange</b><br><b>80 Holtz Drive</b><br><b>Buffalo, NY</b>  |   | Assignee or other notification for:<br><br>Bank Of America   |  |                     |                       |
| Sheet no. <u>1</u> of <u>13</u> continuation sheets attached to<br>Schedule of Creditors Holding Unsecured Nonpriority Claims                          |   |  | Subtotal<br>(Total of this page)   | \$ <b>61,577.00</b> |                       |
|  |   |  | Total  |                     |                       |
|  |   |  | (Use only on last page of the completed Schedule F. Report also on<br>the Summary of Schedules, and if applicable, on the Statistical<br>Summary of Certain Liabilities and Related Data.) |                     |                       |
|  |   |  |  | \$                  |                       |

IN RE Erhard, Harold Helmut &amp; Erhard, Francine Gail

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br><i>(See Instructions Above.)</i>               | CODEBTOR<br>HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE | CONTINGENT   | UNLIQUIDATED        | AMOUNT<br>OF<br>CLAIM |
|---|---|--|--|---------------------|-----------------------|
|   |   |  |  |                     |                       |
| ACCOUNT NO. <b>4339-9300-2776-0646</b><br><br><b>Bank Of America</b><br><b>Box 15726</b><br><b>Wilmington, DE 19886-5726</b>  | H   | 2008-Credit Card   |  |                     | <b>14,426.00</b>      |
| ACCOUNT NO.<br><br><b>Fia Card Services</b><br><b>Box 15713</b><br><b>Wilmington, DE 19886-5713</b>                           |   | Assignee or other notification for:<br><br><b>Bank Of America</b>                                  |  |                     |                       |
| ACCOUNT NO. <b>4339-9300-2605-0247</b><br><br><b>Bank Of America</b><br><b>Box 15726</b><br><b>Wilmington, DE 19886-5726</b>  | H   | 2008-Credit Card   |  |                     | <b>3,067.00</b>       |
| ACCOUNT NO.<br><br><b>Frederick J. Hanna &amp; Ass.</b><br><b>1427 Roswell Rd.</b><br><b>Marietta, GA 30062</b>               |   | Assignee or other notification for:<br><br><b>Bank Of America</b>                                  |  |                     |                       |
| ACCOUNT NO. <b>3743-220467-34865</b><br><br><b>Bank Of America</b><br><b>Box 17054</b><br><b>Wilmington, DE 19884</b>         | H   | 2008-Credit Card   |  |                     | <b>12,000.00</b>      |
| ACCOUNT NO.<br><br><b>American Express</b><br><b>Box 0001</b><br><b>Los Angeles, CA 90096</b>                                 |   | Assignee or other notification for:<br><br><b>Bank Of America</b>                                  |  |                     |                       |
| ACCOUNT NO. <b>4800-1130-6002-5397</b><br><br><b>Bank Of America</b><br><b>Box 15726</b><br><b>Wilmington, DE 19886-5726</b>  | H   | 2008-Credit Card/Business Line of Credit   |  |                     | <b>18,000.00</b>      |
| Sheet no. <b>2</b> of <b>13</b> continuation sheets attached to<br>Schedule of Creditors Holding Unsecured Nonpriority Claims |   |  | Subtotal<br>(Total of this page)   | \$ <b>47,493.00</b> |                       |
|   |   |  | Total  |                     |                       |
|   |   |  | (Use only on last page of the completed Schedule F. Report also on<br>the Summary of Schedules, and if applicable, on the Statistical<br>Summary of Certain Liabilities and Related Data.) |                     |                       |
|   |   |  |  | \$                  |                       |

IN RE Erhard, Harold Helmut &amp; Erhard, Francine Gail

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br><i>(See Instructions Above.)</i>                 | CODEBTOR<br>HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE | AMOUNT<br>OF<br>CLAIM  |                     |                  |
|---|---|--|--|---------------------|------------------|
|   |   |  | CONTINGENT   | UNLIQUIDATED        | DISPUTED         |
| ACCOUNT NO. <b>1077441277</b><br><br><b>Bank Of America</b><br><b>Box 17054</b><br><b>Wilmington, DE 19884</b>                  | H   |  |  |                     | <b>51.00</b>     |
| ACCOUNT NO.<br><br><b>ER Solutions, Inc.</b><br><b>G-0889675</b><br><b>800 W. 39th St., Box 9004</b><br><b>Renton, WA 98057</b> |   | Assignee or other notification for:<br><br><b>Bank Of America</b>                                  |  |                     |                  |
| ACCOUNT NO. <b>4870-4300-0013-2611</b><br><br><b>Bank Of America</b><br><b>Box 15726</b><br><b>Wilmington, DE 19886-5726</b>    | H   | <b>2008-Credit Card/Business Line of Credit</b>  |  |                     | <b>5,000.00</b>  |
| ACCOUNT NO. <b>3743-220539-21595</b><br><br><b>Bank Of America</b><br><b>Box 15726</b><br><b>Wilmington, DE 19886-5726</b>      | C   | <b>1/09-Credit Card</b>  |  |                     | <b>5,950.00</b>  |
| ACCOUNT NO.<br><br><b>American Express</b><br><b>Box 0001</b><br><b>Los Angeles, CA 90096</b>                                   |   | Assignee or other notification for:<br><br><b>Bank Of America</b>                                  |  |                     |                  |
| ACCOUNT NO. <b>4800-1131-7629-0976</b><br><br><b>Bank Of America</b><br><b>Box 851001</b><br><b>Dallas, TX 75285-1001</b>       | W   | <b>1/09-Credit Card</b>  |  |                     | <b>3,400.00</b>  |
| ACCOUNT NO. <b>4313-0382-9520-6068</b><br><br><b>Bank Of America</b><br><b>Box 851001</b><br><b>Dallas, TX 75285-1001</b>       | W   | <b>1/09-Credit Card</b>  |  |                     | <b>13,000.00</b> |
| Sheet no. <b>3</b> of <b>13</b> continuation sheets attached to<br>Schedule of Creditors Holding Unsecured Nonpriority Claims   |   |  | Subtotal<br>(Total of this page)   | \$ <b>27,401.00</b> |                  |
|   |   |  | Total  |                     |                  |
|   |   |  | (Use only on last page of the completed Schedule F. Report also on<br>the Summary of Schedules, and if applicable, on the Statistical<br>Summary of Certain Liabilities and Related Data.) |                     |                  |
|   |   |  |  | \$                  |                  |

IN RE Erhard, Harold Helmut &amp; Erhard, Francine Gail

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br><i>(See Instructions Above.)</i>                     | CODEBTOR<br>HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE | CONTINGENT   | UNLIQUIDATED        | AMOUNT<br>OF<br>CLAIM |
|---|---|--|--|---------------------|-----------------------|
|   |   |  |  |                     |                       |
| ACCOUNT NO. <b>4339-9300-1546-9655</b><br><br><b>Bank Of America</b><br><b>Box 17054</b><br><b>Wilmington, DE 19884</b>             | H   | <b>2006-Credit Card</b>  |  |                     | <b>32,000.00</b>      |
| ACCOUNT NO. <b>10772-41278; 10774-41277</b><br><br><b>Bank Of America</b><br><b>Box 37176</b><br><b>San Francisco, CA 94137</b>     | H   | <b>2008-Overdrawn Accts.</b>   |  |                     | <b>1,444.00</b>       |
| ACCOUNT NO. <b>10734</b><br><br><b>Barr Lumber</b><br><b>111 East Mill St.</b><br><b>San Bernardino, CA 92412</b>                   | H   | <b>2008-Unpaid Materials</b>   |  |                     | <b>420.00</b>         |
| ACCOUNT NO. <b>1182</b><br><br><b>Bob's Tire Service</b><br><b>15625 Fourth St.</b><br><b>Victorville, CA 92395</b>                 | H   | <b>2008-Unpaid Tire Repairs</b>  |  |                     | <b>400.00</b>         |
| ACCOUNT NO. <b>Erhard 00117</b><br><br><b>Brundage-Bone Concrete Pumping</b><br><b>590-A Main St.</b><br><b>Riverside, CA 92501</b> | H   | <b>2008-Unpaid Concrete Pumping</b>  |  |                     | <b>600.00</b>         |
| ACCOUNT NO.<br><br><b>Coface Collection North America</b><br><b>Box 8510</b><br><b>Metaire, LA 70011</b>                            |   | <b>Assignee or other notification for:<br/>Brundage-Bone Concrete Pumping</b>                      |  |                     |                       |
| ACCOUNT NO. <b>4388-6470-9087-4126</b><br><br><b>Capital One</b><br><b>Box 60024</b><br><b>City Of Industry, CA 91716</b>           | H   | <b>2007-Credit Card</b>  |  |                     | <b>3,100.00</b>       |
| Sheet no. <b>4</b> of <b>13</b> continuation sheets attached to<br>Schedule of Creditors Holding Unsecured Nonpriority Claims       |   |  | Subtotal<br>(Total of this page)   | \$ <b>37,964.00</b> |                       |
|   |   |  | Total  |                     |                       |
|   |   |  | (Use only on last page of the completed Schedule F. Report also on<br>the Summary of Schedules, and if applicable, on the Statistical<br>Summary of Certain Liabilities and Related Data.) |                     |                       |
|   |   |  |  | \$                  |                       |

IN RE Erhard, Harold Helmut & Erhard, Francine Gail

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br><i>(See Instructions Above.)</i>               | CODEBTOR<br>HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE | AMOUNT<br>OF<br>CLAIM  |                     |                  |
|---|---|--|--|---------------------|------------------|
|   |   |  | CONTINGENT   | UNLIQUIDATED        | DISPUTED         |
| ACCOUNT NO.<br><b>MRS Associates, Inc.</b><br><b>1930 Olney Ave.</b><br><b>Cherry Hill, NJ 08003</b>                          |   | <b>Assignee or other notification for:<br/>Capital One</b>   |  |                     |                  |
| ACCOUNT NO. <b>5291-0773-3206-9488</b><br><b>Capital One</b><br><b>Box 60024</b><br><b>City Of Industry, CA 91716</b>         | H   | <b>2007-Credit Card</b>  |  |                     | <b>1,800.00</b>  |
| ACCOUNT NO. <b>4121-7413-1076-8523</b><br><b>Capital One</b><br><b>Box 60024</b><br><b>City Of Industry, CA 91716</b>         | W   | <b>2/09-Credit Card</b>  |  |                     | <b>5,550.00</b>  |
| ACCOUNT NO.<br><b>NCO Financial Systems</b><br><b>Box 15740</b><br><b>Wilmington, DE 19850</b>                                |   | <b>Assignee or other notification for:<br/>Capital One</b>   |  |                     |                  |
| ACCOUNT NO. <b>4388-6417-7115-9469</b><br><b>Capital One</b><br><b>Box 60024</b><br><b>City Of Industry, CA 91716</b>         | W   | <b>1/09-Credit Card</b>  |  |                     | <b>3,400.00</b>  |
| ACCOUNT NO. <b>90427</b><br><b>Cash Call</b><br><b>Box 66007</b><br><b>Anaheim, CA 92816</b>                                  | H   | <b>2008-Unsecured Personal Loan</b>  |  |                     | <b>9,000.00</b>  |
| ACCOUNT NO. <b>4479-4827-0165-8126</b><br><b>Chase Bank</b><br><b>Box 90414</b><br><b>Palatine, IL 60094-3749</b>             | C   | <b>2007-Credit Card</b>  |  |                     | <b>12,287.00</b> |
| Sheet no. <b>5</b> of <b>13</b> continuation sheets attached to<br>Schedule of Creditors Holding Unsecured Nonpriority Claims |   |  | Subtotal<br>(Total of this page)   | \$ <b>32,037.00</b> |                  |
|   |   |  | Total  |                     |                  |
|   |   |  | (Use only on last page of the completed Schedule F. Report also on<br>the Summary of Schedules, and if applicable, on the Statistical<br>Summary of Certain Liabilities and Related Data.) |                     |                  |
|   |   |  |  | \$                  |                  |

IN RE Erhard, Harold Helmut &amp; Erhard, Francine Gail

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br><i>(See Instructions Above.)</i>                       | CODEBTOR<br>HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE | CONTINGENT   | UNLIQUIDATED        | AMOUNT<br>OF<br>CLAIM |
|---|---|--|--|---------------------|-----------------------|
|   |   |  |  |                     |                       |
| ACCOUNT NO. <b>4559-5127-0056-8026</b><br><br><b>Chase Bank</b><br><b>Box 90414</b><br><b>Palatine, IL 60094-3749</b>                 | W   | 2008-Credit Card   |  |                     | 7,800.00              |
| ACCOUNT NO. <b>4185-8712-9926-4260</b><br><br><b>Chase Bank</b><br><b>Box 90414</b><br><b>Palatine, IL 60094-3749</b>                 | W   | 1/09-Credit Card   |  |                     | 4,100.00              |
| ACCOUNT NO. <b>4266-8410-5645-6419</b><br><br><b>Chase Bank</b><br><b>Box 90414</b><br><b>Palatine, IL 60094-3749</b>                 | W   | 2008-Credit Card   |  |                     | 8,100.00              |
| ACCOUNT NO. <b>5149-3800-0006-5364</b><br><br><b>Chase Bank</b><br><b>Box 90414</b><br><b>Palatine, IL 60094-3749</b>                 | W   | 2008-Credit Card   |  |                     | 5,500.00              |
| ACCOUNT NO. <b>5466-1601-4825-6355</b><br><br><b>Citibank</b><br><b>Box 6000</b><br><b>The Lakes, NV 89163</b>                        | H   | 2008-Credit Card   |  |                     | 13,000.00             |
| ACCOUNT NO.<br><br><b>Capital Management Services, LLP</b><br><b>726 Exchange St.</b><br><b>Suite 700</b><br><b>Buffalo, NY 14210</b> |   | Assignee or other notification for:<br><br><b>Citibank</b>   |  |                     |                       |
| ACCOUNT NO.<br><br><b>Alliance One</b><br><b>4850 Street Rd.</b><br><b>Suite 300</b><br><b>Trevose, PA 19053</b>                      |   | Assignee or other notification for:<br><br><b>Citibank</b>   |  |                     |                       |
| Sheet no. <b>6</b> of <b>13</b> continuation sheets attached to<br>Schedule of Creditors Holding Unsecured Nonpriority Claims         |   |  | Subtotal<br>(Total of this page)   | \$ <b>38,500.00</b> |                       |
|   |   |  | Total  |                     |                       |
|   |   |  | (Use only on last page of the completed Schedule F. Report also on<br>the Summary of Schedules, and if applicable, on the Statistical<br>Summary of Certain Liabilities and Related Data.) |                     |                       |
|   |   |  |  | \$                  |                       |

IN RE Erhard, Harold Helmut &amp; Erhard, Francine Gail

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br><i>(See Instructions Above.)</i>   | CODEBTOR<br>HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE | CONTINGENT   | UNLIQUIDATED        | AMOUNT<br>OF<br>CLAIM |
|---|---|--|--|---------------------|-----------------------|
|   |   |  |  |                     |                       |
| ACCOUNT NO. <b>GZ: RK544</b><br><br><b>Consulate General--Fed'l German Republic</b><br><b>6222 Wilshire Blvd.</b><br><b>Suite 500</b><br><b>Los Angeles, CA 90048</b> | H   | <b>2007-Pension Overpayment</b>  |  |                     | <b>2,000.00</b>       |
| ACCOUNT NO.<br><br><b>Allied National</b><br><b>1800 Century Park East</b><br><b>Suite 600</b><br><b>Los Angeles, CA 90067</b>  |   | <b>Assignee or other notification for:</b><br><b>Consulate General--Fed'l German Republic</b>      |  |                     |                       |
| ACCOUNT NO. <b>HELM 022</b><br><br><b>Coronado Stone</b><br><b>11191 Calabash Ave.</b><br><b>Fontana, CA 92337</b>  | H   | <b>2008-Unpaid Materials</b>   |  |                     | <b>800.00</b>         |
| ACCOUNT NO. <b>054100-318</b><br><br><b>Dal Tile</b><br><b>2834 C.F. Hawn Fwy.</b><br><b>Dallas, TX 75217</b>   | H   | <b>2007-Unpaid Materials</b>   |  |                     | <b>4,000.00</b>       |
| ACCOUNT NO.<br><br><b>Charles B. Carey</b><br><b>25910 Acero</b><br><b>#360</b><br><b>Mission Viejo, CA 92691</b>   |   | <b>Assignee or other notification for:</b><br><b>Dal Tile</b>                                      |  |                     |                       |
| ACCOUNT NO. <b>None</b><br><br><b>Dan's Concrete Pumping</b><br><b>6395 W. Lilac Rd.</b><br><b>Bonsall, CA 92003</b>  | H   | <b>2008-Unpaid Concrete Pumping Bill</b>   |  |                     | <b>1,000.00</b>       |
| ACCOUNT NO. <b>6011-0000-4912-7487</b><br><br><b>Discover Card</b><br><b>Box 6103</b><br><b>Carol Stream, IL 60197-6103</b>   | H   | <b>2008-Credit Card</b>  |  |                     | <b>8,119.00</b>       |
| Sheet no. <b>7</b> of <b>13</b> continuation sheets attached to<br>Schedule of Creditors Holding Unsecured Nonpriority Claims   |   |  | Subtotal<br>(Total of this page)   | \$ <b>15,919.00</b> |                       |
|   |   |  | Total  |                     |                       |
|   |   |  | (Use only on last page of the completed Schedule F. Report also on<br>the Summary of Schedules, and if applicable, on the Statistical<br>Summary of Certain Liabilities and Related Data.) |                     |                       |
|   |   |  |  | \$                  |                       |

IN RE Erhard, Harold Helmut &amp; Erhard, Francine Gail

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br><i>(See Instructions Above.)</i>   | CODEBTOR<br>HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE | CONTINGENT   | UNLIQUIDATED        | AMOUNT<br>OF<br>CLAIM |
|---|---|--|--|---------------------|-----------------------|
|   |   |  |  |                     |                       |
| ACCOUNT NO. <b>6011-0008-5812-0532</b><br><br><b>Discover Card</b><br><b>Box 6103</b><br><b>Carol Stream, IL 60197-6103</b>   | W   | <b>2008-Credit Card</b>  |  |                     | <b>6,500.00</b>       |
| ACCOUNT NO. <b>4313-0848-1653-9645</b><br><br><b>Downey Savings/U.S. Bank</b><br><b>Box 15726</b><br><b>Wilmington, DE 19886</b>                                      | H   | <b>2008-Credit Card</b>  |  |                     | <b>3,400.00</b>       |
| ACCOUNT NO. <b>126154</b><br><br><b>Dr. Bredenkamp/Head &amp; Neck Asso.</b><br><b>26726 Crown Valley Pkwy.</b><br><b>Suite 200</b><br><b>Mission Viejo, CA 92691</b> | H   | <b>2008-Medical</b>  |  |                     | <b>330.00</b>         |
| ACCOUNT NO.<br><br><b>Medicredit, Inc.</b><br><b>Box 78150</b><br><b>Corona, CA 92877-0121</b>  |   | <b>Assignee or other notification for:<br/>Dr. Bredenkamp/Head &amp; Neck Asso.</b>                |  |                     |                       |
| ACCOUNT NO. <b>4037-6600-0863-1517</b><br><br><b>East West Bank</b><br><b>Box 790408</b><br><b>St. Louis, MO 63179</b>  | H   | <b>1/09-Credit Card</b>  |  |                     | <b>1,175.00</b>       |
| ACCOUNT NO. <b>56000</b><br><br><b>Endura Steel</b><br><b>17671 Bear Valley Rd.</b><br><b>Hesperia, CA 92345</b>  | H   | <b>1/09-Unpaid Materials</b>   |  |                     | <b>800.00</b>         |
| ACCOUNT NO. <b>6899733</b><br><br><b>Gold Star Equipment Rentals</b><br><b>21834 Bear Valley Rd.</b>  | C   | <b>2008-Unpaid Equipment Rental</b>  |  |                     | <b>8,000.00</b>       |
| Sheet no. <b>8</b> of <b>13</b> continuation sheets attached to<br>Schedule of Creditors Holding Unsecured Nonpriority Claims   |   |  | Subtotal<br>(Total of this page)   | \$ <b>20,205.00</b> |                       |
|   |   |  | Total  |                     |                       |
|   |   |  | (Use only on last page of the completed Schedule F. Report also on<br>the Summary of Schedules, and if applicable, on the Statistical<br>Summary of Certain Liabilities and Related Data.) |                     |                       |
|   |   |  |  | \$                  |                       |

IN RE Erhard, Harold Helmut &amp; Erhard, Francine Gail

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br><i>(See Instructions Above.)</i>  | CODEBTOR<br>HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE | CONTINGENT                       | UNLIQUIDATED        | AMOUNT<br>OF<br>CLAIM |
|--|---|--|----------------------------------|---------------------|-----------------------|
|  |   |  |                                  |                     |                       |
| ACCOUNT NO. <b>125579</b><br><br><b>HCS Cutler</b><br><b>Box 1149</b><br><b>Rancho Cucamonga, CA 91729</b>   | H   | <b>2008-Unpaid Materials Balance</b>   |                                  |                     | <b>4,000.00</b>       |
| ACCOUNT NO.<br><br><b>Caine Weiner</b><br><b>Box 5010</b><br><b>Woodland Hills, CA 91365</b>   |   | Assignee or other notification for:<br><br><b>HCS Cutler</b>                                       |                                  |                     |                       |
| ACCOUNT NO. <b>6035 3201 5514 9360</b><br><br><b>Home Depot</b><br><b>Box 6028</b><br><b>The Lakes, NV 88901</b>   | C   | <b>2008-Credit Card</b>  |                                  |                     | <b>8,600.00</b>       |
| ACCOUNT NO. <b>6035 3220 1592 7282</b><br><br><b>Home Depot</b><br><b>Box 6028</b><br><b>The Lakes, NV 88901</b>   | H   | <b>2008-Credit Card</b>  |                                  |                     | <b>13,600.00</b>      |
| ACCOUNT NO. <b>Erhard Masonry</b><br><br><b>Jim Sydner Backhoe Services</b><br><b>15032 Mandan Rd.</b><br><b>Apple Valley, CA 92307</b>  | H   | <b>2008-Unpaid Backhoe Services</b>  |                                  |                     | <b>1,800.00</b>       |
| ACCOUNT NO. <b>4695-9650-0161-9291</b><br><br><b>Juniper Card Services</b><br><b>Box 8803</b><br><b>Wilmington, DE 19899-8803</b>  | H   | <b>2008-Credit Card</b>  |                                  |                     | <b>2,600.00</b>       |
| ACCOUNT NO.<br><br><b>Lawrence Drexler</b><br><b>100 S. West St.</b><br><b>Wilmington, DE 19801</b>  |   | Assignee or other notification for:<br><br><b>Juniper Card Services</b>                            |                                  |                     |                       |
| Sheet no. <b>9</b> of <b>13</b> continuation sheets attached to<br>Schedule of Creditors Holding Unsecured Nonpriority Claims  |   |  | Subtotal<br>(Total of this page) | \$ <b>30,600.00</b> |                       |
| (Use only on last page of the completed Schedule F. Report also on<br>the Summary of Schedules, and if applicable, on the Statistical<br>Summary of Certain Liabilities and Related Data.) |   |  | Total                            | \$                  |                       |
|  |   |  |                                  | \$                  |                       |

IN RE Erhard, Harold Helmut & Erhard, Francine Gail

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br><i>(See Instructions Above.)</i>                                  | CODEBTOR<br>HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE | AMOUNT<br>OF<br>CLAIM  |                    |                 |
|--|---|--|--|--------------------|-----------------|
|  |   |  | CONTINGENT   | UNLIQUIDATED       | DISPUTED        |
| ACCOUNT NO. <b>4327-4779-0039-7926</b><br><br><b>Juniper Card Services</b><br><b>Box 13337</b><br><b>Philadelphia, PA 19101-3337</b>             | W   | <b>4/09-Credit Card</b>  |  |                    | <b>1,976.00</b> |
| ACCOUNT NO. <b>None</b><br><br><b>KPT Concrete Pumping</b><br><b>19510 Van Buren</b><br><b>#F3296</b><br><b>Riverside, CA 92508</b>              | H   | <b>2008-Unpaid Concrete Pumping</b>  |  |                    | <b>1,200.00</b> |
| ACCOUNT NO. <b>614</b><br><br><b>L &amp; L Buildig Materials</b><br><b>2016 S. Reservoir St.</b><br><b>Pomona, CA 91766</b>                      | H   | <b>2008-Unpaid Balance for Materials</b>   |  |                    | <b>500.00</b>   |
| ACCOUNT NO. <b>Helmut Erhard Masonry</b><br><br><b>McDe's Concrete Pumping, Inc.</b><br><b>Box 4043</b><br><b>Orange, CA 92863</b>               | H   | <b>2008-Unpaid Concrete Pumping</b>  |  |                    | <b>700.00</b>   |
| ACCOUNT NO. <b>0223601100008362</b><br><br><b>Micro Center-Retail Services</b><br><b>Box 60148</b><br><b>City Of Industry, CA 91716</b>          | C   | <b>2007-Credit Card</b>  |  |                    | <b>1,095.00</b> |
| ACCOUNT NO.<br><br><b>Corporate Receivables</b><br><b>Box 32995</b><br><b>Phoenix, AZ 85064</b>  |   | <b>Assignee or other notification for:<br/>Micro Center-Retail Services</b>                        |  |                    |                 |
| ACCOUNT NO. <b>30319</b><br><br><b>Mission Internal Medical Group</b><br><b>27451 Los Altos</b><br><b>#100</b><br><b>Mission Viejo, CA 92691</b> | H   | <b>2008-Medical</b>  |  |                    | <b>2,500.00</b> |
| Sheet no. <b>10</b> of <b>13</b> continuation sheets attached to<br>Schedule of Creditors Holding Unsecured Nonpriority Claims                   |   |  | Subtotal<br>(Total of this page)   | \$ <b>7,971.00</b> |                 |
|  |   |  | Total  |                    |                 |
|  |   |  | (Use only on last page of the completed Schedule F. Report also on<br>the Summary of Schedules, and if applicable, on the Statistical<br>Summary of Certain Liabilities and Related Data.) |                    |                 |
|  |   |  |  | \$                 |                 |

IN RE Erhard, Harold Helmut & Erhard, Francine Gail

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br><i>(See Instructions Above.)</i>                              | CODEBTOR<br>HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE | AMOUNT<br>OF<br>CLAIM  |                     |                  |
|--|---|--|--|---------------------|------------------|
|  |   |  | CONTINGENT   | UNLIQUIDATED        | DISPUTED         |
| ACCOUNT NO. <b>33462</b><br><br><b>Mission Realtors</b><br><b>629 Camino De Los Mares</b><br><b>#202B</b><br><b>San Clemente, CA 92673</b>   | C   | <b>2008-Unpaid Rent</b>  |  |                     | <b>1,000.00</b>  |
| ACCOUNT NO. <b>0899</b><br><br><b>Orco Block Co.</b><br><b>Box E</b><br><b>Stanton, CA 90680</b>   | C   | <b>2008-Unpaid Materials</b>   |  |                     | <b>27,000.00</b> |
| ACCOUNT NO.<br><br><b>Steven Nimrod</b><br><b>C/O Geissler &amp; Nimrod</b><br><b>Encino Park Office II, #325</b><br><b>Encino, CA 91316</b> |   | <b>Assignee or other notification for:<br/>Orco Block Co.</b>                                      |  |                     |                  |
| ACCOUNT NO. <b>47038</b><br><br><b>Orco Construction Supply</b><br><b>Box 39000</b><br><b>San Francisco, CA 94139</b>                        | H   | <b>2008-Unpaid Materials and Equipment</b>   |  |                     | <b>3,000.00</b>  |
| ACCOUNT NO.<br><br><b>Travis Porter</b><br><b>2921 E. East. Lowell Rd.</b><br><b>#113</b><br><b>Tucson, AZ 85716</b>                         |   | <b>Assignee or other notification for:<br/>Orco Construction Supply</b>                            |  |                     |                  |
| ACCOUNT NO. <b>260321</b><br><br><b>Pacific Coast Med. Group</b><br><b>Dept. 9484</b><br><b>Laguna Beach, CA 90084</b>                       | H   | <b>2008-Medical</b>  |  |                     | <b>850.00</b>    |
| ACCOUNT NO.<br><br><b>Petra Concrete</b><br><b>Box 7372</b><br><b>Redlands, CA 92375</b>   | H   | <b>2008-Unpaid Concrete Pumping</b>  |  |                     | <b>1,100.00</b>  |
| Sheet no. <b>11</b> of <b>13</b> continuation sheets attached to<br>Schedule of Creditors Holding Unsecured Nonpriority Claims               |   |  | Subtotal<br>(Total of this page)   | \$ <b>32,950.00</b> |                  |
|  |   |  | Total  |                     |                  |
|  |   |  | (Use only on last page of the completed Schedule F. Report also on<br>the Summary of Schedules, and if applicable, on the Statistical<br>Summary of Certain Liabilities and Related Data.) |                     |                  |
|  |   |  |  | \$                  |                  |

IN RE Erhard, Harold Helmut &amp; Erhard, Francine Gail

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br><i>(See Instructions Above.)</i>  | CODEBTOR<br>HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE | CONTINGENT                       | UNLIQUIDATED        | AMOUNT<br>OF<br>CLAIM |
|--|---|--|----------------------------------|---------------------|-----------------------|
|  |   |  |                                  |                     |                       |
| ACCOUNT NO. <b>2582</b><br><br><b>Robertson Ready Mix</b><br><b>Box 3600</b><br><b>Corona, CA 92878</b>  | H   | <b>2008-Unpaid Concrete Ready Mix</b>  |                                  |                     | <b>20,000.00</b>      |
| ACCOUNT NO. <b>CY18744</b><br><br><b>Safety Services Company</b><br><b>Box 6408</b><br><b>Yuma, AZ 85366-6408</b>  | H   | <b>2007-Unpaid Printing, etc.</b>  |                                  |                     | <b>unknown</b>        |
| ACCOUNT NO. <b>6060 7700 0904 4310</b><br><br><b>Schools First Credit Union</b><br><b>Box 11547</b><br><b>Santa Ana, CA 92711</b>  | W   | <b>5/09-Credit Card</b>  |                                  |                     | <b>4,700.00</b>       |
| ACCOUNT NO. <b>Helmut Erhard Masonry</b><br><br><b>Scottsdale Insurance</b><br><b>8877 N. Gainey Center</b><br><b>Scottsdale, AZ 85258</b>   | H   | <b>206-Unpaid Insurance</b>  |                                  |                     | <b>30,000.00</b>      |
| ACCOUNT NO. <b>10038</b><br><br><b>Sepulveda Building Materials</b><br><b>28092 Forbes Rd.</b><br><b>Laguna Niguel, CA 92677</b>   | H   | <b>2008-Unpaid Materials</b>   |                                  |                     | <b>1,100.00</b>       |
| ACCOUNT NO. <b>2448</b><br><br><b>Service Rock Products</b><br><b>16952 "D" St.</b><br><b>Victorville, CA 92393</b>  | H   | <b>2008-Building Materials</b>   |                                  |                     | <b>2,500.00</b>       |
| ACCOUNT NO. <b>Erhard Masonry</b><br><br><b>Sierra Concrete Pumping</b><br><b>18029 Deoday</b><br><b>Hesperia, CA 92345</b>  | H   | <b>2008-Unpaid Concrete Pumping Bill</b>   |                                  |                     | <b>300.00</b>         |
| Sheet no. <u>12</u> of <u>13</u> continuation sheets attached to<br>Schedule of Creditors Holding Unsecured Nonpriority Claims   |   |  | Subtotal<br>(Total of this page) | \$ <b>58,600.00</b> |                       |
| (Use only on last page of the completed Schedule F. Report also on<br>the Summary of Schedules, and if applicable, on the Statistical<br>Summary of Certain Liabilities and Related Data.) |   |  | Total                            | \$                  |                       |
|  |   |  |                                  | \$                  |                       |

IN RE Erhard, Harold Helmut & Erhard, Francine Gail

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br><i>(See Instructions Above.)</i>                | CODEBTOR<br>HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE | CONTINGENT   | UNLIQUIDATED         | AMOUNT<br>OF<br>CLAIM |
|--|---|--|--|----------------------|-----------------------|
|  |   |  |  |                      |                       |
| ACCOUNT NO. <b>Erhard Masonry</b>  |   | <b>H 2008-Unpaid Concrete Pumping Bill</b>   |  |                      | <b>4,300.00</b>       |
| <b>Smitty's Concrete Pumping<br/>Box 400135<br/>Hesperia, CA 92340</b>   |   |  |  |                      |                       |
| ACCOUNT NO. <b>90347</b>   |   | <b>H 2008-Unpaid Equipment Rentals</b>   |  |                      | <b>1,450.00</b>       |
| <b>Sunstate Equipment<br/>Box 52581<br/>Phoenix, AZ 85072</b>  |   |  |  |                      |                       |
| ACCOUNT NO. <b>1160</b>  |   | <b>H 2007-Unpaid Materials</b>   |  |                      | <b>6,000.00</b>       |
| <b>Thompson Building Materials<br/>141 W. Taft Ave.<br/>Orange, CA 92865</b>   |   |  |  |                      |                       |
| ACCOUNT NO. <b>291017</b>  |   | <b>H 2008-Unpaid Equipment Rentals</b>   |  |                      | <b>3,981.00</b>       |
| <b>United Rentals<br/>450 Glass Lane<br/>Suite "C"<br/>Modesto, CA 95356</b>   |   |  |  |                      |                       |
| ACCOUNT NO.  |   | <b>Assignee or other notification for:<br/>United Rentals</b>                                      |  |                      |                       |
| <b>CCC Continental Commercial Group<br/>317 S. Brand Blvd.<br/>Glendale, CA 91204-1701</b>                                     |   |  |  |                      |                       |
| ACCOUNT NO. <b>1086</b>  |   | <b>H 2008-Unpaid Building Materials</b>  |  |                      | <b>4,100.00</b>       |
| <b>Westside Building Material Corp.<br/>16620 Yucca St.<br/>Hesperia, CA 92345</b>   |   |  |  |                      |                       |
| ACCOUNT NO.  |   |  |  |                      |                       |
| Sheet no. <b>13</b> of <b>13</b> continuation sheets attached to<br>Schedule of Creditors Holding Unsecured Nonpriority Claims |   |  | Subtotal<br>(Total of this page)   | \$ <b>19,831.00</b>  |                       |
|  |   |  | Total  |                      |                       |
|  |   |  | (Use only on last page of the completed Schedule F. Report also on<br>the Summary of Schedules, and if applicable, on the Statistical<br>Summary of Certain Liabilities and Related Data.) |                      |                       |
|  |   |  |  | \$ <b>438,417.00</b> |                       |

IN RE **Erhard, Harold Helmut & Erhard, Francine Gail**

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES**

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

| NAME AND MAILING ADDRESS, INCLUDING ZIP CODE<br>OF OTHER PARTIES TO LEASE OR CONTRACT   | DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST.<br>STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY.<br>STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT. |
|---|--|
| <b>Paul And Kristen Ciaramitaro</b><br><b>22401 Ridgebrook</b><br><b>Mission Viejo, CA 92692</b><br><br><b>Elderly Care Network</b><br><b>27281 Calle Del Cid</b><br><b>Mission Viejo, CA 92691</b> | <b>Lessors of Debtors' Residence; Month to Month Lease</b><br><br><b>Month to Month Lease at Residential Care Facility for<br/>Debtor's Mother</b>                                 |

IN RE **Erhard, Harold Helmut & Erhard, Francine Gail**

Debtor(s)

Case No. \_\_\_\_\_

(If known)

## SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR |
|------------------------------|------------------------------|
|                              |                              |

**Fill in this information to identify your case:**

Debtor 1 **Harold Helmut Erhard** \_\_\_\_\_

First Name Middle Name Last Name

Debtor 2 **Francine Gail Erhard** \_\_\_\_\_

(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Central District of California, Santa Ana Division

Case number \_\_\_\_\_  
(If known)

Check if this is:

- An amended filing  
 A supplement showing post-petition chapter 13 income as of the following date:  
 MM / DD / YYYY

**Official Form 6I**

**Schedule I: Your Income**

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Employment**

**1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

|                           | <b>Debtor 1</b>  | <b>Debtor 2 or non-filing spouse</b>                                       |
|---------------------------|--|--|
| <b>Employment status</b>  | <input type="checkbox"/> Employed<br><input type="checkbox"/> Not employed | <input type="checkbox"/> Employed<br><input type="checkbox"/> Not employed |
| <b>Occupation</b>         | _____  | _____  |
| <b>Employer's name</b>    | _____  | _____  |
| <b>Employer's address</b> | Number Street<br>_____   | Number Street<br>_____   |
|                           | City _____ State _____ ZIP Code _____                                      | City _____ State _____ ZIP Code _____                                      |

**How long employed there?** \_\_\_\_\_

**Part 2: Give Details About Monthly Income**

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

**2. List monthly gross wages, salary, and commissions (before all payroll deductions).** If not paid monthly, calculate what the monthly wage would be.

| <b>For Debtor 1</b> | <b>For Debtor 2 or non-filing spouse</b> |
|---------------------|--|
| 2. \$ <u>0.00</u>   | \$ <u>0.00</u>                           |

**3. Estimate and list monthly overtime pay.**

|                     |                  |
|---------------------|------------------|
| 3. + \$ <u>0.00</u> | + \$ <u>0.00</u> |
|---------------------|------------------|

**4. Calculate gross income.** Add line 2 + line 3.

|                   |                |
|-------------------|----------------|
| 4. \$ <u>0.00</u> | \$ <u>0.00</u> |
|-------------------|----------------|

Debtor 1 Harold Helmut Erhard  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

|  | For Debtor 1         | For Debtor 2 or<br>non-filing spouse |
|--|----------------------|--------------------------------------|
| Copy line 4 here .....   | → 4. \$ <u>0.00</u>  | \$ <u>0.00</u>                       |
| <b>5. List all payroll deductions:</b>   |                      |                                      |
| 5a. Tax, Medicare, and Social Security deductions  | 5a. \$ <u>0.00</u>   | \$ <u>0.00</u>                       |
| 5b. Mandatory contributions for retirement plans   | 5b. \$ <u>0.00</u>   | \$ <u>0.00</u>                       |
| 5c. Voluntary contributions for retirement plans   | 5c. \$ <u>0.00</u>   | \$ <u>0.00</u>                       |
| 5d. Required repayments of retirement fund loans   | 5d. \$ <u>0.00</u>   | \$ <u>0.00</u>                       |
| 5e. Insurance  | 5e. \$ <u>0.00</u>   | \$ <u>0.00</u>                       |
| 5f. Domestic support obligations   | 5f. \$ <u>0.00</u>   | \$ <u>0.00</u>                       |
| 5g. Union dues   | 5g. \$ <u>0.00</u>   | \$ <u>0.00</u>                       |
| 5h. Other deductions. Specify: _____   | 5h. + \$ <u>0.00</u> | + \$ <u>0.00</u>                     |
| 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.  | 6. \$ <u>0.00</u>    | \$ <u>0.00</u>                       |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4.   | 7. \$ <u>0.00</u>    | \$ <u>0.00</u>                       |
| <b>8. List all other income regularly received:</b>  |                      |                                      |
| 8a. Net income from rental property and from operating a business,<br>profession, or farm<br><br>Attach a statement for each property and business showing gross<br>receipts, ordinary and necessary business expenses, and the total<br>monthly net income.   | 8a. \$ <u>0.00</u>   | \$ <u>0.00</u>                       |
| 8b. Interest and dividends   | 8b. \$ <u>0.00</u>   | \$ <u>0.00</u>                       |
| 8c. Family support payments that you, a non-filing spouse, or a dependent<br>regularly receive<br><br>Include alimony, spousal support, child support, maintenance, divorce<br>settlement, and property settlement.  | 8c. \$ <u>0.00</u>   | \$ <u>0.00</u>                       |
| 8d. Unemployment compensation  | 8d. \$ <u>0.00</u>   | \$ <u>0.00</u>                       |
| 8e. Social Security  | 8e. \$ <u>0.00</u>   | \$ <u>0.00</u>                       |
| 8f. Other government assistance that you regularly receive<br><br>Include cash assistance and the value (if known) of any non-cash assistance<br>that you receive, such as food stamps (benefits under the Supplemental<br>Nutrition Assistance Program) or housing subsidies.<br><br>Specify: _____ | 8f. \$ <u>0.00</u>   | \$ <u>0.00</u>                       |
| 8g. Pension or retirement income   | 8g. \$ <u>0.00</u>   | \$ <u>0.00</u>                       |
| 8h. Other monthly income. Specify: _____   | 8h. + \$ <u>0.00</u> | + \$ <u>0.00</u>                     |
| 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.  | 9. \$ <u>0.00</u>    | \$ <u>0.00</u>                       |
| 10. Calculate monthly income. Add line 7 + line 9.<br>Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   | 10. \$ <u>0.00</u>   | + \$ <u>0.00</u> = \$ <u>0.00</u>    |
| <b>11. State all other regular contributions to the expenses that you list in Schedule J.</b>  |                      |                                      |
| Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and<br>other friends or relatives.  |                      |                                      |
| Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  |                      |                                      |
| Specify: _____ 11. + \$ <u>0.00</u>  |                      |                                      |
| <b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income.<br>Write that amount on the <i>Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data</i> , if it applies 12.                             |                      |                                      |
| \$ <u>0.00</u><br>Combined<br>monthly income   |                      |                                      |
| <b>13. Do you expect an increase or decrease within the year after you file this form?</b>   |                      |                                      |
| <input checked="" type="checkbox"/> No.<br><input type="checkbox"/> Yes. Explain: <u>None</u>  |                      |                                      |

Fill in this information to identify your case:

Debtor 1 **Harold Helmut Erhard**  
 First Name Middle Name Last Name

Debtor 2 **Francine Gail Erhard**  
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Central District of California, Santa Ana Division

Case number \_\_\_\_\_  
 (If known)

Check if this is:

- An amended filing  
 A supplement showing post-petition chapter 13 expenses as of the following date:  
 MM / DD / YYYY  
 A separate filing for Debtor 2 because Debtor 2 maintains a separate household

## Official Form 6J

### Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

1. Is this a joint case?

- No. Go to line 2.  
 Yes. Does Debtor 2 live in a separate household?  
 No  
 Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

No

Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

- No  
 Yes  
 No  
 Yes  
 No  
 Yes  
 No  
 Yes  
 No  
 Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

- No  
 Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 6I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

If not included in line 4:

- 4a. Real estate taxes  
 4b. Property, homeowner's, or renter's insurance  
 4c. Home maintenance, repair, and upkeep expenses  
 4d. Homeowner's association or condominium dues

#### Your expenses

|     |                    |
|-----|--------------------|
| 4.  | \$ <b>2,500.00</b> |
| 4a. | \$ <b>0.00</b>     |
| 4b. | \$ <b>0.00</b>     |
| 4c. | \$ <b>0.00</b>     |
| 4d. | \$ <b>0.00</b>     |

Debtor 1 **Harold Helmut Erhard**  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

5. Additional mortgage payments for your residence, such as home equity loans

\$ **0.00**

6. Utilities:

- 6a. Electricity, heat, natural gas
- 6b. Water, sewer, garbage collection
- 6c. Telephone, cell phone, Internet, satellite, and cable services
- 6d. Other. Specify: \_\_\_\_\_

6a. \$ **0.00**  
 6b. \$ **0.00**  
 6c. \$ **0.00**  
 6d. \$ **0.00**

7. Food and housekeeping supplies

7. \$ **0.00**

8. Childcare and children's education costs

8. \$ **0.00**

9. Clothing, laundry, and dry cleaning

9. \$ **0.00**

10. Personal care products and services

10. \$ **0.00**

11. Medical and dental expenses

11. \$ **0.00**

12. Transportation. Include gas, maintenance, bus or train fare.

Do not include car payments.

12. \$ **0.00**

13. Entertainment, clubs, recreation, newspapers, magazines, and books

13. \$ **0.00**

14. Charitable contributions and religious donations

14. \$ **0.00**

15. Insurance.

Do not include insurance deducted from your pay or included in lines 4 or 20.

- 15a. Life insurance
- 15b. Health insurance
- 15c. Vehicle insurance
- 15d. Other insurance. Specify: \_\_\_\_\_

15a. \$ **0.00**  
 15b. \$ **0.00**  
 15c. \$ **0.00**  
 15d. \$ **0.00**

16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.

Specify: \_\_\_\_\_

16. \$ **0.00**

17. Installment or lease payments:

- 17a. Car payments for Vehicle 1
- 17b. Car payments for Vehicle 2
- 17c. Other. Specify: \_\_\_\_\_
- 17d. Other. Specify: \_\_\_\_\_

17a. \$ **0.00**  
 17b. \$ **0.00**  
 17c. \$ **0.00**  
 17d. \$ **0.00**

18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).

18. \$ **0.00**

19. Other payments you make to support others who do not live with you.

Specify: Support

19. \$ **2,500.00**

20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.

- 20a. Mortgages on other property
- 20b. Real estate taxes
- 20c. Property, homeowner's, or renter's insurance
- 20d. Maintenance, repair, and upkeep expenses
- 20e. Homeowner's association or condominium dues

20a. \$ **0.00**  
 20b. \$ **0.00**  
 20c. \$ **0.00**  
 20d. \$ **0.00**  
 20e. \$ **0.00**

Debtor 1

**Harold Helmut Erhard**

First Name

Middle Name

Last Name

Case number (*if known*) \_\_\_\_\_

21. Other. Specify: \_\_\_\_\_

21. +\$ **0.00**

22. Your monthly expenses. Add lines 4 through 21.

The result is your monthly expenses.

22. \$ **5,000.00**

23. Calculate your monthly net income.

23a. Copy line 12 (*your combined monthly income*) from Schedule I.

23a. \$ **0.00**

23b. Copy your monthly expenses from line 22 above.

23b. - \$ **5,000.00**

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.

23c. \$ **-5,000.00**

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes. **None**

IN RE **Erhard, Harold Helmut & Erhard, Francine Gail**

Debtor(s)

Case No. \_\_\_\_\_

(If known)

## DECLARATION CONCERNING DEBTOR'S SCHEDULES

### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 32 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date: March 14, 2014

Signature: /s/ Harold Helmut Erhard

Harold Helmut Erhard

Debtor

Date: March 14, 2014

Signature: /s/ Francine Gail Erhard

Francine Gail Erhard

(Joint Debtor, if any)

[If joint case, both spouses must sign.]

### DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social Security No. (Required by 11 U.S.C. § 110.)

*If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document.*

Address

Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

*If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.*

*A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.*

### DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the \_\_\_\_\_ (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the \_\_\_\_\_ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

(Print or type name of individual signing on behalf of debtor)

*[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]*

*Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.*

IN RE:

**Erhard, Harold Helmut & Erhard, Francine Gail**

Debtor(s)

Case No. \_\_\_\_\_

Chapter 7 \_\_\_\_\_

### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### DEFINITIONS

*"In business."* A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

*"Insider."* The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101(2),(31).

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#### 1. Income from employment or operation of business

None State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

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#### 2. Income other than from employment or operation of business

None State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

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#### 3. Payments to creditors

*Complete a. or b., as appropriate, and c.*

None a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

- b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,255.\* If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

\*Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

- c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

- a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| CAPTION OF SUIT<br>AND CASE NUMBER   | NATURE OF PROCEEDING       | COURT OR AGENCY<br>AND LOCATION   | STATUS OR<br>DISPOSITION |
|--|----------------------------|---|--------------------------|
| <b>Service Rock v. Earhard<br/>Masonry; Case No.: SMCVS<br/>900744</b>                     | <b>Complaint for Money</b> | <b>San Bernardino Co. Small Claims Judgment Entered<br/>Ct., Victorville Div.</b> |                          |
| <b>Scottsdale Insurance v. Helmut<br/>Earhard Masonry; Case No.: 30-<br/>2009-00242219</b> | <b>Complaint for Money</b> | <b>OC Superior, Laguna Hills<br/>Division</b>                                     | <b>Judgment Entered</b>  |
| <b>Orco Block Co. v. Earhard<br/>Masonry; Case No.: CIVVS<br/>807869</b>                   | <b>Complaint for Money</b> | <b>San Bernardino Superior Ct.,<br/>Victorville Div.</b>                          | <b>Judgment Entered</b>  |

- b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 5. Repossessions, foreclosures and returns

- a. List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 6. Assignments and receiverships

- a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

- b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 7. Gifts

- a. List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 8. Losses

- a. List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**9. Payments related to debt counseling or bankruptcy**

None List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE  
**Ronald D. Halpern**  
**30011 Ivy Glenn Drive**  
**Suite 112**  
**Laguna Niguel, CA 92677**

DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR  
**5/22/09**

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY  
**1,750.00**

**10. Other transfers**

None a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

**11. Closed financial accounts**

None List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**12. Safe deposit boxes**

None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**13. Setoffs**

None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**14. Property held for another person**

None List all property owned by another person that the debtor holds or controls.

**15. Prior address of debtor**

None If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

**16. Spouses and Former Spouses**

None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

## **17. Environmental Information**

For the purpose of this question, the following definitions apply:

“Environmental Law” means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

“Site” means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

“Hazardous Material” means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

- None a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

**18. Nature, location and name of business**

- None** a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

*If the debtor is a partnership*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

*If the debtor is a corporation*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

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**None** b. Identify any business listed in response to subdivision a., above, that is “single asset real estate” as defined in 11 U.S.C. § 101.

*[If completed by an individual or individual and spouse]*

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: March 14, 2014

Signature /s/ Harold Helmut Erhard  
of Debtor

Harold Helmut Erhard

Date: March 14, 2014

Signature /s/ Francine Gail Erhard  
of Joint Debtor  
(if any)

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Francine Gail Erhard

**0** continuation pages attached

*Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.*

**IN RE:**

**Erhard, Harold Helmut & Erhard, Francine Gail**

Debtor(s)

Case No. \_\_\_\_\_

Chapter 7 \_\_\_\_\_

### **CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION**

**PART A** – Debts secured by property of the estate. (*Part A must be fully completed for EACH debt which is secured by property of the estate. Attach additional pages if necessary.*)

|   |  |  |
|---|--|--|
| Property No. 1  |  |  |
| Creditor's Name:<br><b>Chase National Bank</b>  | Describe Property Securing Debt:<br><b>2001 Toyota Four Runner, Fair Condition</b> |  |
| Property will be ( <i>check one</i> ):<br><input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained   |  |  |
| If retaining the property, I intend to ( <i>check at least one</i> ):<br><input type="checkbox"/> Redeem the property<br><input checked="" type="checkbox"/> Reaffirm the debt<br><input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)). |  |  |
| Property is ( <i>check one</i> ):<br><input type="checkbox"/> Claimed as exempt <input checked="" type="checkbox"/> Not claimed as exempt   |  |  |

|   |   |  |
|---|---|--|
| Property No. 2 (if necessary)   |   |  |
| Creditor's Name:<br><b>Diamond Resorts</b>  | Describe Property Securing Debt:<br><b>Timeshare, at Sedona, AZ</b> |  |
| Property will be ( <i>check one</i> ):<br><input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained   |   |  |
| If retaining the property, I intend to ( <i>check at least one</i> ):<br><input type="checkbox"/> Redeem the property<br><input checked="" type="checkbox"/> Reaffirm the debt<br><input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)). |   |  |
| Property is ( <i>check one</i> ):<br><input type="checkbox"/> Claimed as exempt <input checked="" type="checkbox"/> Not claimed as exempt   |   |  |

**PART B** – Personal property subject to unexpired leases. (*All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.*)

|                               |  |  |
|-------------------------------|--|--|
| Property No. 1                | Describe Leased Property:<br><b>Lessors of Debtors' Residence; Month to Month Lease</b>              | Lease will be assumed pursuant to<br>11 U.S.C. § 365(p)(2):<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Property No. 2 (if necessary) | Describe Leased Property:<br><b>Month to Month Lease at Residential Care Facility for Debtor's M</b> | Lease will be assumed pursuant to<br>11 U.S.C. § 365(p)(2):<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |

2 continuation sheets attached (*if any*)

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date: March 14, 2014

/s/ Harold Helmut Erhard

Signature of Debtor

/s/ Francine Gail Erhard

Signature of Joint Debtor

**CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION**  
*(Continuation Sheet)*

**PART A – Continuation**

|   |  |
|---|--|
| Property No. 3  |  |
| <b>Creditor's Name:</b><br><b>Diamond Resorts</b>   | <b>Describe Property Securing Debt:</b><br><b>Timeshare, in Lahina, Maui</b> |
| Property will be ( <i>check one</i> ):<br><input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained   |  |
| If retaining the property, I intend to ( <i>check at least one</i> ):<br><input type="checkbox"/> Redeem the property<br><input checked="" type="checkbox"/> Reaffirm the debt<br><input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)). |  |
| Property is ( <i>check one</i> ):<br><input type="checkbox"/> Claimed as exempt <input checked="" type="checkbox"/> Not claimed as exempt   |  |

|   |   |
|---|---|
| Property No. 4  |   |
| <b>Creditor's Name:</b><br><b>GMAC</b>  | <b>Describe Property Securing Debt:</b><br><b>2005 Chevrolet Silverado Pickup Truck, Good Condition</b> |
| Property will be ( <i>check one</i> ):<br><input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained   |   |
| If retaining the property, I intend to ( <i>check at least one</i> ):<br><input type="checkbox"/> Redeem the property<br><input checked="" type="checkbox"/> Reaffirm the debt<br><input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)). |   |
| Property is ( <i>check one</i> ):<br><input type="checkbox"/> Claimed as exempt <input checked="" type="checkbox"/> Not claimed as exempt   |   |

|   |   |
|---|---|
| Property No. 5  |   |
| <b>Creditor's Name:</b><br><b>HTS-Lake Tahoe, Inc.</b>  | <b>Describe Property Securing Debt:</b><br><b>Lake Tahoe Timeshare, Incline Village, NV</b> |
| Property will be ( <i>check one</i> ):<br><input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained   |   |
| If retaining the property, I intend to ( <i>check at least one</i> ):<br><input type="checkbox"/> Redeem the property<br><input checked="" type="checkbox"/> Reaffirm the debt<br><input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)). |   |
| Property is ( <i>check one</i> ):<br><input type="checkbox"/> Claimed as exempt <input checked="" type="checkbox"/> Not claimed as exempt   |   |

**PART B – Continuation**

|                       |                                  |   |
|-----------------------|----------------------------------|---|
| Property No.          |                                  |   |
| <b>Lessor's Name:</b> | <b>Describe Leased Property:</b> | Lease will be assumed pursuant to<br>11 U.S.C. § 365(p)(2):<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
| Property No.          |                                  |   |
| <b>Lessor's Name:</b> | <b>Describe Leased Property:</b> | Lease will be assumed pursuant to<br>11 U.S.C. § 365(p)(2):<br><input type="checkbox"/> Yes <input type="checkbox"/> No |

**CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION**  
*(Continuation Sheet)*

**PART A – Continuation**

|   |  |
|---|--|
| Property No. 6  |  |
| <b>Creditor's Name:</b><br>Schools First Credit Union   | <b>Describe Property Securing Debt:</b><br>2004 Mercedes Benz CLK500, Good Condition |
| Property will be ( <i>check one</i> ):<br><input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained   |  |
| If retaining the property, I intend to ( <i>check at least one</i> ):<br><input type="checkbox"/> Redeem the property<br><input checked="" type="checkbox"/> Reaffirm the debt<br><input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)). |  |
| Property is ( <i>check one</i> ):<br><input checked="" type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt   |  |

|  |   |
|--|---|
| Property No.   |   |
| <b>Creditor's Name:</b>  | <b>Describe Property Securing Debt:</b> |
| Property will be ( <i>check one</i> ):<br><input type="checkbox"/> Surrendered <input type="checkbox"/> Retained   |   |
| If retaining the property, I intend to ( <i>check at least one</i> ):<br><input type="checkbox"/> Redeem the property<br><input type="checkbox"/> Reaffirm the debt<br><input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)). |   |
| Property is ( <i>check one</i> ):<br><input type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt   |   |

|  |   |
|--|---|
| Property No.   |   |
| <b>Creditor's Name:</b>  | <b>Describe Property Securing Debt:</b> |
| Property will be ( <i>check one</i> ):<br><input type="checkbox"/> Surrendered <input type="checkbox"/> Retained   |   |
| If retaining the property, I intend to ( <i>check at least one</i> ):<br><input type="checkbox"/> Redeem the property<br><input type="checkbox"/> Reaffirm the debt<br><input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)). |   |
| Property is ( <i>check one</i> ):<br><input type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt   |   |

**PART B – Continuation**

|                       |                                  |   |
|-----------------------|----------------------------------|---|
| Property No.          |                                  |   |
| <b>Lessor's Name:</b> | <b>Describe Leased Property:</b> | Lease will be assumed pursuant to<br>11 U.S.C. § 365(p)(2):<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
| Property No.          |                                  |   |
| <b>Lessor's Name:</b> | <b>Describe Leased Property:</b> | Lease will be assumed pursuant to<br>11 U.S.C. § 365(p)(2):<br><input type="checkbox"/> Yes <input type="checkbox"/> No |

IN RE:

Case No. \_\_\_\_\_

Erhard, Harold Helmut & Erhard, Francine Gail

Chapter 7 \_\_\_\_\_

Debtor(s)

**VERIFICATION OF CREDITOR MAILING LIST**

The above named debtor(s), or debtor's attorney if applicable, do hereby certify under penalty of perjury that the attached Master Mailing List of creditors, consisting of 11 sheet(s) is complete, correct and consistent with the debtor's schedules pursuant to Local Bankruptcy Rule 1007-2(d) and I/we assume all responsibility for errors and omissions.

Date: March 14, 2014

Signature: /s/ Harold Helmut Erhard  
**Harold Helmut Erhard**

Debtor

Date: March 14, 2014

Signature: /s/ Francine Gail Erhard  
**Francine Gail Erhard**

Joint Debtor, if any

Date: March 14, 2014

Signature: /s/ Ronald D. Halpern  
**Ronald D. Halpern 81192**

Attorney (if applicable)

Harold Helmut Erhard  
22526 Formentor  
Mission Viejo, CA 92692

Francine Gail Erhard  
22526 Formentor  
Mission Viejo, CA 92692

Ronald D Halpern Attorney at Law  
30011 Ivy Glenn Drive Suite 112  
Laguna Niguel, CA 92677

A&L Builders Supply Inc  
Box 1833  
Apple Valley, CA 92307

AV Auto Glass  
22264 Ottawa  
Apple Valley, CA 92307

ACS Inc  
Box 9001561  
Louisville, KY 40290

Alliance One  
4850 Street Rd  
Suite 300  
Trevose, PA 19053

Allied National  
1800 Century Park East  
Suite 600  
Los Angeles, CA 90067

American Express  
Box 0001  
Los Angeles, CA 90096

Angelus Block  
11374 Tuxford  
Sun Valley, CA 91352

Arco Gas  
Box 70887  
Charlotte, NC 28272

Arrowhead General Ins Agency  
2365 Northside Dr  
#450  
San Diego, CA 92108

Bank Of America  
Box 17054  
Wilmington, DE 19884

Bank Of America  
Box 37176  
San Francisco, CA 94137

Bank Of America  
Box 15726  
Wilmington, DE 19886-5726

Bank Of America  
Box 851001  
Dallas, TX 75285-1001

Barr Lumber  
111 East Mill St  
San Bernardino, CA 92412

Bob's Tire Service  
15625 Fourth St  
Victorville, CA 92395

Brundage-Bone Concrete Pumping  
590-A Main St  
Riverside, CA 92501

Caine Weiner  
Box 5010  
Woodland Hills, CA 91365

Capital Management Services LLP  
726 Exchange St  
Suite 700  
Buffalo, NY 14210

Capital One  
Box 60024  
City Of Industry, CA 91716

Cash Call  
Box 66007  
Anaheim, CA 92816

CCC Continental Commercial Group  
317 S Brand Blvd  
Glendale, CA 91204-1701

Charles B Carey  
25910 Acero  
#360  
Mission Viejo, CA 92691

Chase Bank  
Box 90414  
Palatine, IL 60094-3749

Chase National Bank  
Box 36520  
Louisville, KY 40233-6520

Citibank  
Box 6000  
The Lakes, NV 89163

Coface Collection North America  
Box 8510  
Metairie, LA 70011

Consulate General--Fed'l German Rep  
6222 Wilshire Blvd  
Suite 500  
Los Angeles, CA 90048

Coronado Stone  
11191 Calabash Ave  
Fontana, CA 92337

Corporate Receivables  
Box 32995  
Phoenix, AZ 85064

Dal Tile  
2834 CF Hawn Fwy  
Dallas, TX 75217

Dan's Concrete Pumping  
6395 W Lilac Rd  
Bonsall, CA 92003

Diamond Resorts  
10600 West Carleston Blvd  
Las Vegas, NV 89135

Discover Card  
Box 6103  
Carol Stream, IL 60197-6103

Downey Savings/US Bank  
Box 15726  
Wilmington, DE 19886

Dr Bredenkamp/Head & Neck Asso  
26726 Crown Valley Pkwy  
Suite 200  
Mission Viejo, CA 92691

East West Bank  
Box 790408  
St. Louis, MO 63179

Elderly Care Network  
27281 Calle Del Cid  
Mission Viejo, CA 92691

Endura Steel  
17671 Bear Valley Rd  
Hesperia, CA 92345

ER Solutions Inc  
G-0889675  
800 W 39th St Box 9004  
Renton, WA 98057

Fia Card Services  
Box 15713  
Wilmington, DE 19886-5713

Focus Receivables Mgmt LLC  
Box 725069  
Atlanta, GA 31139

Franchise Tax Board  
Box 942867  
Sacramento, CA 94267-0031

Frederick J Hanna & Ass  
1427 Roswell Rd  
Murietta, GA 30062

GMAC  
Box 78234  
Phoenix, AZ 85062-8234

HCS Cutler  
Box 1149  
Rancho Cucamonga, CA 91729

Home Depot  
Box 6028  
The Lakes, NV 88901

HTS-Lake Tahoe Inc  
450 Carillon Pkwy  
#210  
St. Petersburg, FL 33716

Internal Revenue Service  
Box 21126  
Philadelphia, PA 19114-0326

Jim Sydner Backhoe Services  
15032 Mandan Rd  
Apple Valley, CA 92307

Juniper Card Services  
Box 8803  
Wilmington, DE 19899-8803

Juniper Card Services  
Box 13337  
Philadelphia, PA 19101-3337

KPT Concrete Pumping  
19510 Van Buren  
#F3296  
Riverside, CA 92508

L & L Buildig Materials  
2016 S Reservoir St  
Pomona, CA 91766

Lawrence Drexler  
100 S West St  
Wilmington, DE 19801

McDe's Concrete Pumping Inc  
Box 4043  
Orange, CA 92863

Medicredit Inc  
Box 78150  
Corona, CA 92877-0121

Micro Center-Retail Services  
Box 60148  
City Of Industry, CA 91716

Mission Internal Medical Group  
27451 Los Altos  
#100  
Mission Viejo, CA 92691

Mission Realtors  
629 Camino De Los Mares  
#202B  
San Clemente, CA 92673

MRS Associates Inc  
1930 Olney Ave  
Cherry Hill, NJ 08003

NCO Financial Systems  
Box 15740  
Wilmington, DE 19850

Orco Block Co  
Box E  
Stanton, CA 90680

Orco Construction Supply  
Box 39000  
San Francisco, CA 94139

Pacific Coast Med Group  
Dept 9484  
Laguna Beach, CA 90084

Paul And Kristen Ciaramitaro  
22401 Ridgebrook  
Mission Viejo, CA 92692

Petra Concrete  
Box 7372  
Redlands, CA 92375

Robertson Ready Mix  
Box 3600  
Corona, CA 92878

Safety Services Company  
Box 6408  
Yuma, AZ 85366-6408

Schools First Credit Union  
Box 11547  
Santa Ana, CA 92711

Scottsdale Insurance  
8877 N Gainey Center  
Scottsdale, AZ 85258

Sepulveda Building Materials  
28092 Forbes Rd  
Laguna Niguel, CA 92677

Service Rock Products  
16952 "D" St  
Victorville, CA 92393

Sierra Concrete Pumping  
18029 Deoday  
Hesperia, CA 92345

Smitty's Concrete Pumping  
Box 400135  
Hesperia, CA 92340

Steven Nimrod  
C/O Geissler & Nimrod  
Encino Park Office II #325  
Encino, CA 91316

Sunstate Equipment  
Box 52581  
Phoenix, AZ 85072

Thompson Building Materials  
141 W Taft Ave  
Orange, CA 92865

Travis Porter  
2921 E East Lowell Rd  
#113  
Tucson, AZ 85716

United Rentals  
450 Glass Lane  
Suite "C"  
Modesto, CA 95356

Westside Building Material Corp  
16620 Yucca St  
Hesperia, CA 92345

February 2006

2006 USBC Central District of California

**United States Bankruptcy Court  
Central District of California, Santa Ana Division**

In re  
**Erhard, Harold Helmut & Erhard, Francine Gail**  
Debtor(s).

CHAPTER: 7  
CASE NO.:

**DEBTOR'S CERTIFICATION OF EMPLOYMENT INCOME  
PURSUANT TO 11 U.S.C. § 521(a)(1)(B)(iv)**

Please fill out the following blank(s) and check the box next to one of the following statements:

I, Erhard, Harold Helmut, the debtor in this case, declare under penalty

(*Print Name of Debtor*)

of perjury under the laws of the United States of America that:

- I have attached to this certificate copies of my pay stubs, pay advices and/or other proof of employment income for the 60-day period prior to the date of the filing of my bankruptcy petition.  
(*NOTE: the filer is responsible for blacking out the Social Security number on pay stubs prior to filing them.*)
- I was self-employed for the entire 60-day period prior to the date of the filing of my bankruptcy petition, and received no payment from any other employer.
- I was unemployed for the entire 60-day period prior to the date of the filing of my bankruptcy petition.

I, Erhard, Francine Gail, the debtor in this case, declare under penalty of

(*Print Name of Joint Debtor, if any*)

perjury under the laws of the United States of America that:

- I have attached to this certificate copies of my pay stubs, pay advices and/or other proof of employment income for the 60-day period prior to the date of the filing of my bankruptcy petition.  
(*NOTE: the filer is responsible for blacking out the Social Security number on pay stubs prior to filing them.*)
- I was self-employed for the entire 60-day period prior to the date of the filing of my bankruptcy petition, and received no payment from any other employer.
- I was unemployed for the entire 60-day period prior to the date of the filing of my bankruptcy petition.

Date: March 14, 2014

Signature /s/ Harold Helmut Erhard  
Debtor

Date: March 14, 2014

Signature /s/ Francine Gail Erhard  
Joint Debtor (if any)

|  |  |
|--|--|
| <p>Attorney or Party Name, Address, Telephone &amp; FAX Nos., State Bar No. &amp;<br/>Email Address<br/><b>Ronald D. Halpern</b><br/><b>30011 Ivy Glenn Drive, Suite 112</b><br/><b>Laguna Niguel, CA 92677</b><br/><b>Phone: (949) 249-2922 Fax: (949) 495-0365</b><br/><b>Email: ronhalpern@aol.com</b><br/><b>Bar Number: 81192</b></p> <p><input type="checkbox"/> <i>Attorney for Erhard, Harold Helmut &amp; Erhard, Francine Gail</i></p> | <p>FOR COURT USE ONLY</p>  |
| <p><b>United States Bankruptcy Court</b><br/><b>Central District of California, Santa Ana Division</b></p>   |  |
| <p>In re :<br/><b>Erhard, Harold Helmut &amp; Erhard, Francine Gail</b></p> <p>Debtor (s).</p>   | <p>CASE NO:<br/><b>CHAPTER 7</b></p> <p><b>DECLARATION RE: LIMITED SCOPE OF APPEARANCE PURSUANT TO LBR 2090-1</b></p> <p>[No Hearing Required]</p> |

TO THE COURT, THE DEBTOR, THE TRUSTEE (if any), AND THE UNITED STATES TRUSTEE:

1. I am the attorney for the Debtor in the above-captioned bankruptcy case.
2. On (*specify date*) \_\_\_\_\_, I agreed with the Debtor that for a fee of \$ \_\_\_\_\_, I would provide the following services only:
  - a.  Prepare and file the Petition and Schedules
  - b.  Represent the Debtor at the 341(a) Meeting
  - c.  Represent the Debtor in any relief from stay motions
  - d.  Represent the Debtor in any proceeding involving an objection to Debtor's discharge pursuant to 11 U.S.C. § 727
  - e.  Represent the Debtor in any proceeding to determine whether a specific debt is nondischargeable under 11 U.S.C. § 523
  - f.  Other (*specify*):

3. I declare under penalty of perjury under the laws of the United States that the foregoing is true and correct and that this declaration was executed on the following date at the city set forth in the upper left-hand corner of the prior page.

Date March 14, 2014

**Ronald D. Halpern, Attorney at Law**

Printed name of law firm

I HEREBY APPROVE THE ABOVE:

/s/ Harold Helmut Erhard

Signature of Debtor

/s/ Ronald D. Halpern

Signature of attorney

**Ronald D. Halpern**

Printed name of attorney

**PROOF OF SERVICE OF DOCUMENT**

I am over the age of 18 and not a party to this bankruptcy case or adversary proceeding. My business address is:

A true and correct copy of the foregoing document entitled: **DECLARATION RE: LIMITED SCOPE OF APPEARANCE PURSUANT TO LBR 2090-1** will be served or was served (a) on the judge in chambers in the form and manner required by LBR 5005-2(d); and (b) in the manner stated below:

**1. TO BE SERVED BY THE COURT VIA NOTICE OF ELECTRONIC FILING (NEF):** Pursuant to controlling General Orders and LBR, the foregoing document will be served by the court via NEF and hyperlink to the document. On (*date*) \_\_\_\_\_, I checked the CM/ECF docket for this bankruptcy case or adversary proceeding and determined that the following persons are on the Electronic Mail Notice List to receive NEF transmission at the email addresses stated below:

Service information continued on attached page

**2. SERVED BY UNITED STATES MAIL:**

On (*date*) \_\_\_\_\_, I served the following persons and/or entities at the last known addresses in this bankruptcy case or adversary proceeding by placing a true and correct copy thereof in a sealed envelope in the United States mail, first class, postage prepaid, and addressed as follows. Listing the judge here constitutes a declaration that mailing to the judge will be completed no later than 24 hours after the document is filed.

Service information continued on attached page

**3. SERVED BY PERSONAL DELIVERY, OVERNIGHT MAIL, FACSIMILE TRANSMISSION OR EMAIL (state method for each person or entity served):** Pursuant to F.R.Civ.P. 5 and/or controlling LBR, on (*date*) \_\_\_\_\_, I served the following persons and/or entities by personal delivery, overnight mail service, or (for those who consented in writing to such service method), by facsimile transmission and/or email as follows. Listing the judge here constitutes a declaration that personal delivery on, or overnight mail to, the judge will be completed no later than 24 hours after the document is filed.

Service information continued on attached page

I declare under penalty of perjury under the laws of the United States that the foregoing is true and correct.

March 14, 2014

*Date*

Harold Helmut Erhard

*Printed Name*

/s/ Harold Helmut Erhard

*Signature*